ACCREDITATION UPGRADE • FOND FAREWELL TO DR. STERN • OBESITY RESEARCH

JGH NEWS

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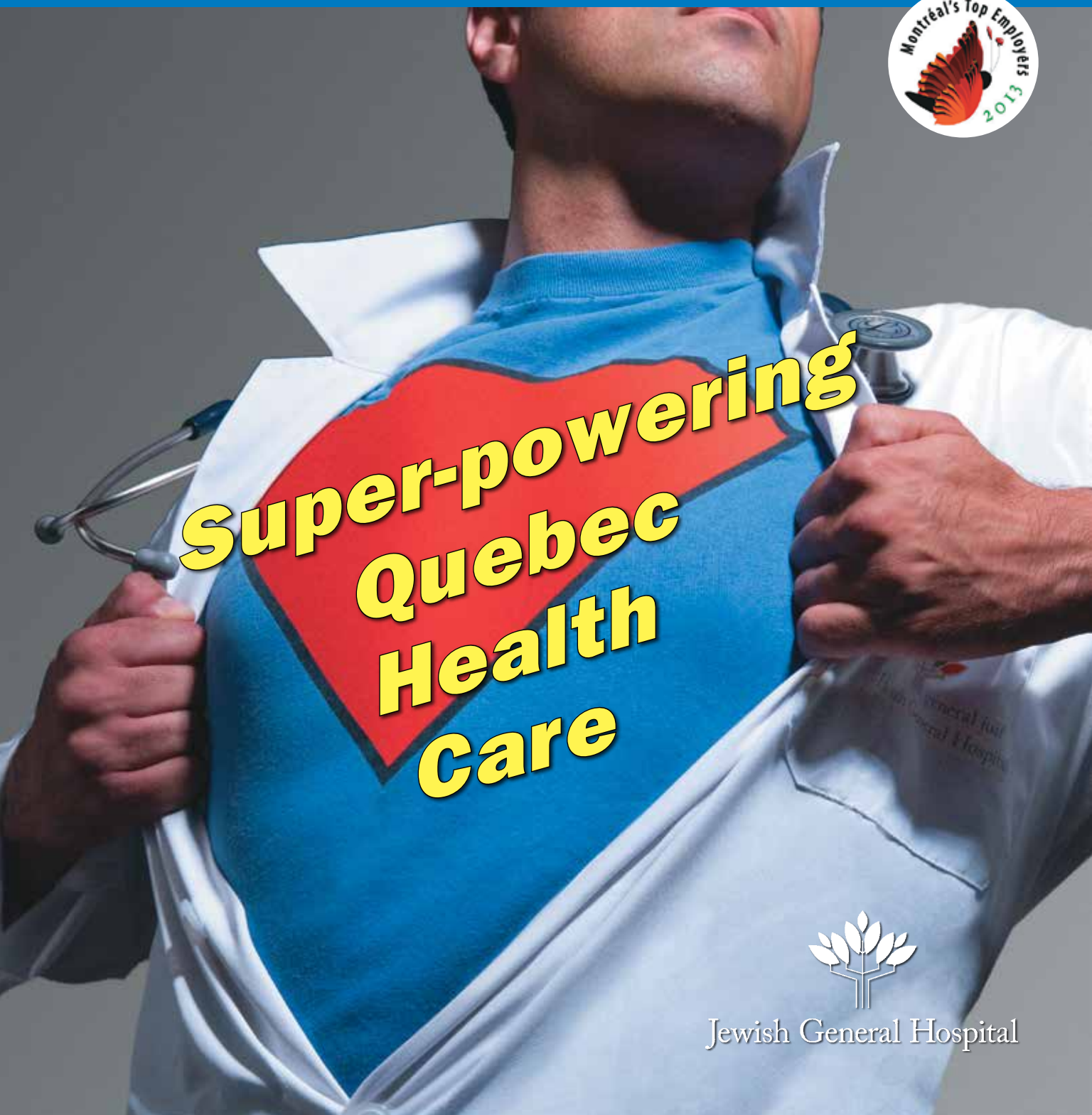

Helping take the JGH to new heights has been the opportunity of a lifetime

My mother, all 4 feet 11 inches of her, died about seven years ago at 82. This extraordinary, intelligent and dynamic woman survived the Second World War by hiding for three years in a small room with her five brothers and parents in the town of Bussum, Holland. She inspired my siblings and me to give something back to Canada, as Canada had provided her with a second chance at a wonderful life.

Dr. Hartley Stern

Therefore, it was a given that if opportunities to do something meaningful came my way, I would accept them readily. That's what brought me to the Jewish General Hospital. In mid-2007, Samuel Minzberg, who was then JGH President, offered me the job of Executive Director—without question, the most exciting opportunity of my life.

Until then, I had been an academic colorectal cancer surgeon, researcher and oncology administrator at the University of Toronto and in Ottawa. I had gained the management experience and, more importantly, the conviction that success in leading a healthcare institution depends on making patients' needs the primary focus. This can be achieved only if all of the healthcare staff and the community accept that concept, and then truly walk the walk. Or, as the French saying goes, "Il faut que les bottines suivent les babines!"

Two early impressions stand out. The first was a conversation with Lynne McVey, Director of Nursing at that time, in which we agreed that placing the highest value on patients was central to the hospital's future. The second was my observation that the hospital needed to be cleaner. How were staff to rally around the banner of patient care, if the rooms and corridors were not clean enough? Under JGH President Bernard Stotland, we made cleanliness a top priority to control infection and restore pride in our "home", as the first steps toward a true culture of quality and safety.

With a superb team of clinical and non-clinical directors, doctors, nurses, allied health professionals, technicians, orderlies and others, we then implemented a strategic plan with various partnerships to achieve many goals: Moving patients more humanely through their trajectory of care; objectively measuring how well we treat patients; developing a master capital plan with renovations to Cardiac Care, Endocrinology, Radiology, the Breast Centre, Epidemiology and numerous in-patient units; building the Centre for Child Development and Mental Health and Pavilion K; adopting a "no-shame, no-blame" policy; posting information about our healthcare performance on the hospital's web site; creating a plan for research that has seen us become a pillar of Canadian health science research; and developing a Human Resources plan that has led to the highest staff retention rates in Canada.

To keep me grounded, I'm blessed to have found my life partner, Dorothy, who stands for all the values I have championed at the JGH. With a little help from me, she has raised the two most beautiful sons, Daniel and Andrew, a man could want.

Watching all of the superb directors and managers as they successfully led their troops through complicated times and stressful change has made me proud to be part of this hospital. The JGH has given me the opportunity of a lifetime to fulfill the commitment I made to my mother many years ago.

To everyone: *Thank you!*

Dr. Hartley Stern
Executive Director

Jewish General Hospital

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SIR MORTIMER B. DAVIS -
JEWISH GENERAL HOSPITAL
DEPARTMENT OF PUBLIC AFFAIRS AND COMMUNICATIONS
communications@jgh.mcgill.ca

President:
Rick Dubrovsky

Executive Director:
Dr. Hartley Stern

Director of Public Affairs and Communications:
Glenn J. Nashen

Editor:
Henry Mietkiewicz

Contributors:
Dana Frank
Stephanie Malley
Astrid Morin
Jacynthe Touchette
Tod Hoffman
Pascal Fischer
Mindy Salomon

Graphic design:
Christine Lalonde

Translation:
Louise Trépanier

Printer:
TLC Global Impression

Photography:
JGH Audio-Visual Services
Ruslan Shalai

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Jewish General Hospital
3755 Côte Ste-Catherine Road, A-107
Montreal, Quebec H3T 1E2

Tel.: 514-340-8222

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Wishing you bounty and joy on Thanksgiving, October 14

Goodbye to an Executive Director of quality

As Dr. Hartley Stern steps down in September as Executive Director of the Jewish General Hospital, he leaves a markedly different institution than the one he entered during his first days on the job in March 2008.

Without a doubt, the most breathtaking addition during the past 5½ years has been the soaring structure that now occupies what had once been a nondescript parking lot on Légaré St. alongside Cummings Pavilion E. This as-yet unfinished building, the multi-million dollar critical-care wing known as Pavilion K, had previously been the subject of years of meticulous planning by JGH staff. But Dr. Stern's guidance in the final, critical leg of the process was of key importance in winning the government's approval, climaxing in a 2010 ground-breaking ceremony attended by Premier Jean Charest and three cabinet ministers.

> **"This hospital is a tremendous partner and contributor to the overall healthcare system."**
>
> — Dr. Hartley Stern

During Dr. Stern's term, other much-needed facilities were also inaugurated—most notably, the Centre for Child Development and Mental Health in 2010, as well as the greatly expanded and renovated Peter Brojde Lung Cancer Centre and the Marlene & Joel King Breast Centre, both in 2012.

But it is the Herzl CRIU Walk-in Centre, which opened in 2010, that perhaps best represents Dr. Stern's philosophy of what a hospital can aspire to. Significantly, this clinic came into existence as a result of tight cooperation between the JGH Department of Family Medicine and the CSSS de la Montagne, with strong support from the Montreal Health and Social Services Agency and McGill University.

With contributions from so many participants, the Walk-in Centre symbolizes Dr. Stern's strong belief that partnerships—between the JGH and all levels of government, other hospitals, academic institutions and research centres at home and abroad—are essential in enabling the JGH to accomplish what the hospital would be hard-pressed to achieve in isolation.

At the Walk-in Centre, the outcome for patients is easier access to health care, where anyone (especially those without a family doctor) can be seen 365 days a year without an appointment or a prior phone call. This, too, goes a long way toward realizing Dr. Stern's vision of a stronger healthcare system where the unmet needs of patients are identified and satisfied.

Similarly, patients have benefited from partnerships with such institutions as the LaSalle Hospital, Mt. Sinai Hospital, Lakeshore General Hospital and the Jewish Eldercare Centre, with subsequent reductions in waiting times for surgery, as well as timely on-site treatment that minimizes the burden on the JGH Emergency Department. Cancer patients, in particular, will eventually see improvements through the hospital's pivotal role in the Rossy Cancer Network (seamless treatment among various Montreal institutions) and the Quebec-Clinical Research Organization in Cancer.

The JGH's growing reputation as an able and eager collaborator has had positive repercussions locally, provincially, nationally and globally. In particular, the hospital is now seen as an even more desireable destination for employment among top-level clinicians, researchers and a wide array of professionals in clinical and non-clinical fields. Of special note is Dr. Stern's role in the 2009 recruitment of Dr. Roderick McInnes, who has built on the hospital's excellence in medical research through his leadership of the Lady Davis Institute at the JGH.

Dr. Hartley Stern announces the accreditation results in January 2013.

At the same time, Dr. Stern continued to emphasize the vital importance of making cleanliness, safety and a superior quality of care permanent and indispensable elements of the culture among employees of all types at all levels. Thus, in 2010, the JGH became the first hospital in Quebec to implement the surgical safety checklist. And in 2011, the JGH made headlines as the first healthcare institution in the province to publicly disclose details about the quality of key aspects of the hospital's performance. This information can be found at jgh.ca/qualityindicators.

Dr. Stern's success in inspring staff to continually improve the quality of care is reflected in Accreditation Canada awarding the JGH its highest accolade earlier this year—accreditation with Exemplary Standing (see page 6). Similarly, the JGH has been praised by an independent group of Quebec auditors for

Dr. Hartley Stern (fourth from right) at the Pavilion K construction site on Oct. 7, 2011 with (from left) Irwin Cotler (MP for Mount Royal), JGH President Rick Dubrovsky, Pierre Arcand (Minister of Sustainable Development and MNA for Mount Royal), Lawrence S. Bergman (MNA for D'Arcy McGee), Health and Social Services Minister Dr. Yves Bolduc, Hai Pham-Huy (Director of Capital Assets, Medical Technology and Technical Services at the Montreal Health and Social Services Agency) and Philippe Castiel (JGH Director of Planning and Real Estate Development).

being fiscally responsible in its delivery of high-quality care (see page 7). In addition, the Canadian Institute for Health Information has singled out the JGH as the most efficient hospital in Canada in the way it channels the maximum funds into health care by saving on administrative costs. And the hospital is now ranked as one of Montreal's top employers for 2013.

In 2008, in his first interview with *JGH News*, Dr. Stern articulated his vision, which has since become integral to his achievements and his legacy: "Staff who pay attention to the small aspects of quality and cleanliness end up performing well in every aspect of what they do. These employees feel better about their institution, so they contribute more. That's why we're shifting from 'I' and 'me' to a hospital of 'we' and 'us'. As much as possible, you'll hear me say, 'This is about us and our hospital and our pride in the hospital.'

During his early years at the JGH, Dr. Stern remained active as a colorectal surgeon.

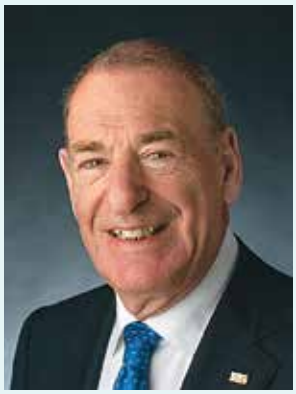
"If we at the JGH make a point of reaching out and sharing our learning and our best practices in a significant way, then my hope is that the rest of Quebec will begin to better appreciate this hospital as being a tremendous partner and contributor to the overall healthcare system."

Dr. Stern begins his new duties in October in Ottawa as Executive Director and Chief Executive Officer of the Canadian Medical Protective Association.

Three JGH leaders have served as President during the 5½ years of Dr. Hartley Stern's term as Executive Director.

Rick Dubrovsky (2011-present): "It is a particular pleasure for me to have had the opportunity of working with Hartley. As a true professional, he has garnered respect from everyone within the hospital, his counterparts at the other hospitals, at McGill University and in government. With his vision for health care in Quebec and his determination to see the JGH as the leading healthcare institution in Quebec and beyond, he has capitalized on that respect to accomplish the goals he set for himself and our hospital. The report of the Canadian Institute for Health Information, the Accreditation Canada standing and the Gabrièle report all validate the success of the JGH. Together with the countless dedicated professionals in our hospital under Hartley's strong leadership, he is leaving us in better shape than when he arrived. I wish his wife, Dorothy, and him much success in the new chapter in his career, and I thank him on behalf of all of us for his profound contribution the JGH."

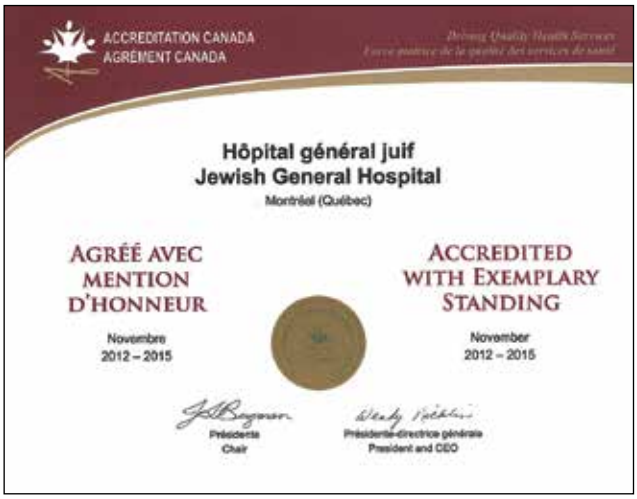
Bernard Stotland, FCPA, FCA (2009-2011): "From the time he joined the JGH, Hartley mastered every situation. His talent as an administrator at the JGH has been spectacular—from breaking down silos among staff, to championing partnerships with other hospitals, to introducing Transformational Change. He excelled as a colorectal surgeon and kept at it for as long as his duties as Executive Director allowed. He even gained such an excellent grasp of French that it was not long before he began conducting meetings and delivering speeches in French with ease. Hartley's knowledge and skills were a great influence on me and I wish him all the best."



Samuel Minzberg (2007-2009): "When we recruited Hartley to the JGH, we knew we were getting an exceptional individual. But, frankly, we underestimated him. He has proven to be a superb leader and administrator who has carried through the hospital's vision with a laser-like focus. It has been an honour for me to be associated with him these past 5½ years."

JGH achieves highest accreditation honour

The JGH has become one of the few hospitals of its size in Canada to have its accreditation upgraded to the highest possible status of Exemplary Standing. "The Jewish General Hospital has demonstrated that quality and safety are embedded in the fabric of the organization," Wendy Nicklin, President and CEO of Accreditation Canada, said after the upgrade was granted in May. "Achieving accreditation with Exemplary Standing is a clear demonstration of the commitment of the leadership and staff to ongoing quality improvement on behalf of the people they serve."



When the accreditation results were first announced in January, the JGH was given the elevated status of "With Commendation". However, the hospital's designation was raised because eight key improvements were completed by the end of April. These included additional security procedures in Pathology and the biomedical laboratories, finalizing a violence prevention strategy, providing better storage for gases such as nitrogen and carbon dioxide, and improving the transport and disposal of biomedical waste.

In its January report, Accreditation Canada found that the JGH had complied with more than 96.5 per cent of the criteria that must be present for safety and proper quality of care, including accessibility, continuity of care and good workplace conditions.

The hospital was also found to have complied with 34 of Accreditation Canada's 35 required organizational practices in six key areas, including the culture of safety, risk assessment, the use of medication, infection control, communication and work life.

For the full range of quality criteria, perfect scores were recorded by the Emergency Department, the blood bank and transfusion services, the service that sterilizes and reprocesses reusable medical equipment, and planning services, as well as patient flow, resource management, and emergency and crisis preparedness. Even among the services that fell short of perfection, most scored higher than 90 per cent, with many coming in above 97 per cent.

"The accreditation exercise was important because it provided an objective validation of the high level of quality that the JGH has achieved," said Dr. Hartley Stern, Executive Director. "When we talk about improving quality, we really mean it, and now we can confirm it."

"We're very proud of this achievement, because it involved cooperation among all members of staff," said Chantal Bellerose, JGH Accreditation Coordinator and Quality Improvement Advisor. "Now our challenge is to sustain our success by maintaining our momentum for self-improvement."

Team effort focuses on patients' needs in Rossy Cancer Network

Development of the Rossy Cancer Network is tangible proof that its partners—the MUHC, McGill University, the Jewish General Hospital and St. Mary's Hospital—are interested "not in ego-building, but in cooperation and partnership in the best interests of the patients who rely on us," Dr. Hartley Stern, JGH Executive Director, said in May at the Network's official launch.

Dr. Stern said the Network, created with major support from the Larry and Cookie Rossy Foundation, will rely on streamlined communications and teamwork among employees at the various institutions "to provide superior cancer treatment and care at whatever member-institution is best suited to each patient's particular requirements. This means that even if a patient is diagnosed at one hospital, he or she can be treated at any institution in the network whose healthcare experts and facilities most closely meet the patient's needs."

The Network's member institutions are already dealing with about 11,000 cancer cases and are now in a position "to harmonize their best practices and go to the next level in providing patients with an incredible wealth of healthcare support," Dr. Stern said.

He explained that while hospitals deserve to be proud of what they accomplish, they should not go as far as boasting about being Number 1, as if they were in competition with one another. "This is the basis of the silo mentality, where organizations hoard their expertise and are reluctant to share information. When this occurs, hospitals are at risk of overlooking an extremely important fact: 'Number 1' is a title that deserves to be applied *only* to the patient. If the patient isn't the ultimate winner, nobody wins."

JGH commended for fiscal responsibility

Efficiency confirmed despite difficult circumstances

The Jewish General Hospital is conducting itself in a fiscally responsible manner and delivering care of superior quality, despite being faced with a disproportionately high volume of patients, says a report by an independent group of auditors.

The report, released earlier this summer, was prepared under the supervision of Pierre Gabrièle, former Deputy Minister of Health and Social Services and one of Quebec's most respected healthcare experts. It commends the JGH for its good governance and transparency—in particular, praising the close collaboration between the Board of Directors and Senior Management in meeting patients' needs while controlling costs.

The Montreal Health and Social Services Agency commissioned the auditors' report after the JGH requested that the hospital's healthcare activities and financial performance be reviewed to determine and confirm the nature of the budgetary challenges that the JGH faces.

The auditors paid special attention to the JGH's $18 million operating deficit, including major efforts by the hospital to improve efficiency, reduce costs and maximize revenues. After an in-depth analysis, the auditors concluded that they were "not in a position to identify any substantial cost-savings that would have permitted the institution to reduce its $18 million operating deficit." They added: **"Just because an institution is efficient, one should not assume that it is adequately financed."**

The report notes that revenues which the hospital receives from the government have not kept pace with the rapidly increasing demand for patient care. Although the JGH has encouraged many patients to seek treatment in other hospitals that are closer to home and provide services of similar quality to a lower volume of patients, most choose to remain with the JGH. In addition, a disproportionately large number of JGH patients are elderly and/or have chronic illnesses that entail costly and frequent treatment. Many also have no choice but to turn to the JGH for treatment that is not easily available elsewhere.

"The JGH is pleased with the results of the report, and supports the findings that this hospital is one of the most efficient and well managed in Montreal," says Dr. Hartley Stern, Executive Director. "The JGH will continue to work with the Montreal Health and Social Services Agency and will follow up on all areas of improvement to address the issues identified in this report."

The report's findings complement and support recent conclusions by Accreditation Canada (please see page 6) and the Canadian Institute for Health Information, which have determined that the JGH is one of Canada's most efficient and best-performing hospitals.

The JGH was praised by the auditors for the many instances where the quality of care has not only been maintained, but upgraded, even though the hospital has experienced delays in receiving funding for its approved projects. The JGH has demonstrated its dedication to the financial well-being of the province's healthcare system by reducing its expenditures by several million dollars in clinical as well as non-clinical areas, without affecting patient care.

According to Dr. Stern, the JGH remains strongly committed to developing innovative collaborations and working with its many partners across Montreal and Quebec to meet patients' growing requirements. Not only do these bonds strengthen the public healthcare system, they have helped to reduce waiting times and provide JGH patients with prompt care in the institution that best suits their needs.

Additional highlights from the auditors' report

- **On the JGH Board of Directors:** "It has a good understanding of the financial situation and, above all, a willingness to provide services of quality for the lowest cost."
- **On Emergency services:** "At the JGH, the Emergency Department is not left to fend for itself. On the contrary, the hospital as a whole (e.g., medical activities, admission, head nurses) concentrates on decreasing congestion and facilitating the admission of the patients who are on stretchers."
- **Revenues:** "We have confirmed that the institution has made every effort to collect the revenues to which it is entitled, whether from users or other groups, based on policies that are rigourous and up to date."
- **Pride in the hospital:** "During our interviews, we perceived great pride in the management and the quality of care provided at the JGH."

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Your inside view of "Care for all"!

Rabbi Raphael Afilalo counsels a patient.

Ethical dilemmas viewed from a Jewish perspective

The sanctity of life is of paramount importance in Judaism, to the extent that observant Jews believe they do not have complete freedom to do whatever they wish with their own bodies, a JGH symposium on Jewish medical ethics was told in June.

Dr. Michael Bouhadana, of the JGH Department of Family Medicine and Supportive Care Services, made the point to illustrate some of the fundamental differences between Jewish tradition and secular laws and practices. He explained to an audience of about 150 people that, as a general rule for observant Jews, personal autonomy is limited even in life-or-death medical situations.

Since the body is seen as God's vessel, a person has no moral right to cut short one's own life or the life of another person, he said. Similarly, life-support can not be withheld from an extremely sick patient, if the only argument for doing so is that the patient's quality of life is poor.

Dr. Bouhadana's comments were part of a day-long program at the Gelber Conference Centre that attracted numerous doctors, nurses, healthcare professionals, lawyers and rabbis from a wide array of healthcare institutions, community organizations and private companies. The symposium was organized by Rabbi Raphael Afilalo, JGH Director of Pastoral Services, to provide insights into ethical decision-making processes from Jewish and secular perspectives.

Throughout the day, JGH doctors presented actual case histories involving ethical dilemmas (without disclosing patients' identities), followed by explanations from Dr. Bouhadana and JGH Clinical Ethicist Lucie Wade as to how the problems might be assessed from Jewish and secular viewpoints. The objective was not to arrive at definitive answers, but to acquaint the audience with differences in approach.

For example, Dr. Eli Segal, a staff physician in the JGH Emergency Department, described the case of a 40-year-old Jewish man in apparent good health, who suffered a sudden cardiac arrest while jogging and died shortly after being taken to the hospital. Dr. Bouhadana said Jewish law generally forbids an autopsy and would reject it in this case if its sole purpose were simply to help doctors understand why and how the death occurred.

However, he added that the ban can be overridden in certain circumstances. For example, in this instance, the autopsy might be permitted if the doctors' intent was to save lives by gathering medical data to inform family members whether they were genetically predisposed to life-threatening cardiac problems similar to those that killed the jogger.

Have you noticed the recent rise in interest rates?

To most people a small rise in interest rates may not seem like a big deal. This is exactly what has happened in the bond market where 10 year bond yields have increased by 0.70% as we write this article. While most investors are comfortable with some price volatility in their stock portfolios, many are not accustomed to seeing price declines in the fixed income portion of their portfolios, and for good reason as interest rates have been in a secular decline for about 30 years. As a result of this trend, it is important to note that there is an entire generation of investors who have never experienced a sustained rising interest rate environment and with it, the negative interest rate risk associated with bonds and related fixed income investments.

It is therefore as important to look at the maturities of your fixed income instruments, as it is to look at yield and credit. As an example, a fixed income portfolio with a duration of 10 years can move up or down 10% with a move of 1.00% in interest rates. A $100,000 investment in such a portfolio will increase to $110,000 or decrease to $90,000 depending on whether interest rates move up or down by 1.00%. As a result, while volatility in a fixed income portfolio cannot be completely avoided, it can be somewhat controlled by the decisions that are made regarding the duration of the portfolio.

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When improving quality is the goal of change, savings naturally follow

Dr. Hartley Stern claims to be delighted. But even as he lists the JGH's successes in improving patient care, his expression remains one of deep concern.

As Executive Director, Dr. Stern has seen the hospital undergo a quiet revolution in the three years since it introduced a sweeping program of frank self-examination and intensive self-improvement, known as Transformational Change. Effortlessly and in rapid succession, he cites examples of the hospital's progress: Access to care is now easier. Patient flow—from admission through treatment to discharge—is getting smoother. For the vast majority of people, waiting times in Emergency are stable, despite the higher volume of patients. Fewer operations are cancelled and more of them start on time. Bedsores and certain other painful complications are on the decline. Medical supplies are being used more efficiently. Financial support for patients' services is getting a boost from waste reduction in non-clinical areas.

Yet, Dr. Stern insists, the full potential of Transformational Change is far from being realized: Dramatic gains at the JGH are being made almost independently, at a time when hospitals throughout Quebec should be forming a broad, co-operative network to improve the efficiency and quality of patient care. Together and in large numbers, Dr. Stern believes, these institutions would have a much better chance of bringing wide-ranging and much-needed improvement to the public healthcare system as a whole.

"The medical literature on this subject is clear," he explains. "A focus on the quality and performance of care will yield financial and waiting-time benefits. But if you focus only on the money without making quality a priority, and you say, 'We want hospitals to spend less,' you end up with a band-aid that doesn't work and will never work. Instead, you get hospitals that provide poorer-quality service or less service.

"Real improvement—the kind that we've seen at the Jewish General Hospital—can only be achieved through an overhaul, by introducing a true Transformational Change program across the province. The government also needs to begin linking institutional performance to financial compensation. If we're really going to drive change in this province, we need to invest in the institutions that perform well, while motivating the under-performers to improve."

Dr. Stern says the JGH's intention is not to seem as if it's boasting about its own accomplishments, but to step forward as proof that a hospital that can perform better by making a serious, multi-year commitment to upgrading the quality of its care.

"One element of this commitment is to engage in a twinning process, where institutions teach one another their best practices. That's what we're doing with Maisonneuve-Rosemont Hospital; they're good at managing specialists in outpatient services and we're learning from them. We're good at moving patients through the Emergency Department, so we're helping them with that. This costs no money and it's transformational sharing."

The JGH's three-year immersion in Transformational Change has also shown how important it is to measure performance in real time in order to identify areas where the level of performance is unacceptable. "But at the provincial level, outcomes aren't measured enough. Waiting times are measured for all of Quebec, but this doesn't tell us the entire story about the total volume of activity. Similarly, unnecessary injuries to the patient aren't measured in a way that we can do anything about them. Since this data is collected only once a year, it's hard for us to react to it.

"What we do under Transformational Change is try to anticipate what the future is going to look like and what those challenges are likely to be," adds Dr. Stern. "Of course, we're not prophets, and no program is perfect. But we do have a system in place at the JGH, in which the pursuit of quality and efficiency has a direct impact on what patients experience. It's something that has now been implemented hospital-wide, and there's no reason it can't spread province-wide."

Donor support is vital

With Transformational Change continuing indefinitely, the JGH Foundation is seeking an imaginative and generous donor to support this program and take it to new heights. For more information about donating to any aspect of Transformational Change, please call the JGH Foundation at 514-340-8222 ext. 3252. Additional detail on Pavilion K and the new Emergency Department can also be found at **jghfoundation.org/sections/vkpav.html**.

JGH staff vie to make patient services faster, safer and smoother

It all comes down to a whiteboard in Dr. Lawrence Rosenberg's office.

Hand-written on it in marker-pen are the names of various hospital departments—including Geriatrics, Intensive Care, the Laundry, the Kitchen, Dietetics, and Speech Pathology/Audiology—whose representatives have approached Dr. Rosenberg with fresh, new ideas for change.

Though this may not seem like a remarkable list, it's actually symbolic of the great progress that the JGH has made in Transformational Change, the intensive, multi-year program to improve the quality of care, streamline patient services, boost efficiency and cut costs.

As Director of Transformational Change (and Chief of Surgical Services), Dr. Rosenberg is reviewing these proposals to determine which of them have the potential to become full-fledged projects that will upgrade patients' hospital experience or lead to significant time- and cost-saving improvements in non-clinical areas.

Dr. Lawrence Rosenberg meets with Karine Lepage, Head Nurse in the Internal Medicine ward, to review a Transformational Change project that successfully reorganized the storage of medical supplies to cut costs and make items easier to find. (Please see article on page 14.)

"Today," says Dr. Rosenberg, glancing up the whiteboard, "suggestions are coming to us from all over the hospital. Most didn't come from department chiefs, but from people 'in the trenches'. In fact, so many people are now coming forward with project suggestions that you could almost say we have to ask people to take a number and stand in line."

When Transformational Change was introduced three years ago, Dr. Rosenberg explains, he and the program's leaders had a tough time encouraging hospital staff to take part in the initial projects and come forward with suggestions for projects of their own. (A key element of the program is to have rank-and-file employees generate ideas, since they often have the clearest understanding of what more can be done on patients' behalf.) "These days, our executive committee's biggest task is trying to prioritize all of the proposals that keep coming to us. It's a big job, but it's also a great position to be in."

What this indicates, Dr. Rosenberg says, is that the staff's desire for and commitment to improvement has become ingrained in their culture and work ethic. Also, more and more employees are now prepared to take the initiative in identifying problems and then solving them. This has led to wider access to care, a smoother flow of patients through the hospital, a reduction in certain types of complications, and a more efficient use of medical supplies and equipment.

While gains are often made in clinical areas, Dr. Rosenberg says, waste-cutting measures also prove their worth in non-clinical areas. "For example, if the Purchasing Department isn't negotiating for the best prices, we're overpaying—and the amount of money we overpay comes out of the hospital's fixed budget. So if we overpay by $100 to buy something, that's $100 less that can be spent on what patients need for their care. By the same token, the more money we save, the more we can do to maintain or even upgrade patient care."

What Dr. Rosenberg says he still can't estimate precisely is the total amount of money that the hospital has saved through Transformational Change. In areas such as Purchasing, this sort of calculation is possible. But in many other situations, gains in efficiency are achieved that don't appear on a balance sheet. "If we find a way to eliminate a task or make it faster and easier to complete, one or more employees are freed up to be more productive elsewhere, usually by spending more time at the patient's bedside. The savings are in time and efficiency—not, strictly speaking, in money.

"For instance, we've successfully finished an online order-entry project. This used to be a manual, pen-and-paper exercise that took people a long time over the course of a week. Now that it's digital, it's probably saving an average of 30 to 60 minutes per person each week. You may not be able to count the dollars, but you can be certain that patients will be reaping the benefits down the line."

ER made EZ in streamlined treatment system

When the JGH's new and much larger Emergency Department opens in Pavilion K later this year, it will incorporate measures that have been painstakingly designed to cut waiting times, as well as move patients more quickly and efficiently through and out of the department. In fact, as part of the hospital-wide Transformational Change program, pilot projects are already under way to fine-tune three key features that will be pivotal in ensuring that patients derive the full benefits of the new Emergency Department.

Since September 2011, a streamlined triage system has been in place to shorten waiting times in the current Emergency Department, eliminate duplication of services and provide patients with greater privacy. Gone is the outmoded process that obligated patients to register upon arrival and then wait to be triaged.

Another improvement is the introduction of a Rapid Assessment Zone—an area that allows for the examination and treatment of patients whose ailments are not serious enough to require beds. Instead, patients are seated in cubicles that offer enhanced privacy. Not only are these patients seen more quickly, their placement in the Rapid Assessment Zone frees up beds for individuals with more serious problems. While the zone is currently able to accommodate six Emergency patients, the total will jump to 20 in Pavilion K, where patients will sit in large, comfortable recliner chairs. The JGH is the first Quebec hospital to establish this system, which has met with considerable success in the United States.

When patients do need to be placed in beds, each is now assigned a doctor-nurse team to ensure quick treatment and proper continuity of care. In Pavilion K, the doctor-nurse partnership will remain in place and will be integrated into what is known as a pod system. No longer will there be a large, central staff hub surrounded by patients' cubicles. In its place will be a series of smaller areas (pods), each with its own healthcare team responsible for a specific roster of patients. This decentralized grouping allows healthcare professionals to respond more rapidly to patients' needs. It also features better isolation capabilities, extra privacy, updated cardiac monitoring and a safer environment, especially for mental health patients.

"Patients need privacy, peace and quiet for their well-being and healing," says Valerie Schneidman, Head Nurse of the Emergency Department. "That's why our facilities in Pavilion K have been designed around the needs of patients, as opposed to hospitals of the past that were built largely with staff in mind.

"Of course, these changes will help staff, too, by saving time, increasing efficiency and improving workflow. But the focus of the new design is patients who will be seen and treated faster. At the same time, it will contribute to preventing the transmission of infections and to creating a comfortable and peaceful environment for patients and their loved ones."

In the decentralized treatment areas—known as pods—in Pavilion K's new Emergency Department, each of the smaller healthcare teams will be based at work stations (centre) and will be responsible for a limited number of patients in the nearby rooms.

In Pavilion K, Emergency patients whose problems are less urgent will be examined and treated in recliner chairs, rather than beds, in the Rapid Assessment Zone.

Donor support will be critical in ensuring that innovations to Emergency and critical care will be fully implemented in Pavilion K. More than $1.3 million in private funding is needed to outfit the new triage and registration areas, to provide the Rapid Assessment Zone and pods with their own medical technology (e.g., CT scanner, x-ray machine) and related equipment (monitors, stretchers, treatment chairs), and to meet other needs not funded by the government.

Donations will also be used to acquire extra beds, equipment and furniture that will be used when private (one-bed) rooms are converted to semi-private (two-bed) rooms in times of crisis, such as a large-scale flu outbreak, a natural catastrophe or a major accident. For more information or to donate, please contact the JGH Foundation.

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Evolution yields solutions in surgical services

Dr. Carol-Ann Vasilevsky (lower left) and Dr. Marylise Boutros (right) perform minimally invasive colorectal surgery. Having inserted a tiny fibre-optical camera into the patient's body, they can monitor their progress on a video screen.

If you've got an operation coming up, you take it for granted—as you're entitled to—that the surgery will go ahead on the scheduled day, start on time, and enable you to return home as quickly as possible. Now those expectations are even likelier to be met, as a result of the behind-the-scenes improvements of Transformational Change, the hospital-wide program that heightens efficiency and enhances the patient's experience in the hospital.

Here's what's been happening in Surgery at the JGH since Transformational Change was introduced in 2010:

- Where appropriate, more operations—notably in the Division of Colorectal Surgery—are being performed with minimally invasive techniques to lower the rates of infections and complications, decrease the length of the hospital stay, reduce the amount of prescribed medication that patients need, and enable them to resume normal activities more quickly. For the JGH and the healthcare system, the cost of these types of operations is also dramatically lower.
- A new Pre-Surgical Screening Clinic has centralized and streamlined the tests and interviews that patients undergo before their operations. This has contributed to a significant drop in the proportion of cancelled operations.
- Almost all operations now start on time, with delays cut in some cases by standardizing the process of transferring patients from the hospital units to the operating rooms.
- The average time to prepare an operating room between patients has been slashed, with some non-essential activities eliminated, and certain activities conducted in parallel, instead of one after the other.
- Maximum use is made of operating rooms—on average, more than seven hours per eight-hour day—through innovative scheduling.

David Dilouya can attest to the benefits of minimally invasive surgery, following his colostomy at the JGH in May to treat the painful symptoms of Crohn's disease. Unlike the extended period of recovery that conventional surgery would have required, the 34-year-old Mr. Dilouya recalls that he was able to walk one day after his operation, was discharged after three days, felt good after just two weeks, and returned to his job in a Montreal bar within two months.

"This is the first time in years that I really feel normal," he says. "Before the operation, I was in such pain and was so exhausted all the time that it seemed like I was 100 years old. Afterward, it didn't take long to realize that there was a real change. On the first day after the surgery, even with the I.V. and all of the tubes coming out of me, I stood up and just knew."

This increasing use of minimally invasive surgery is typical of the thrust of Transformational Change, says Dr. Lawrence Rosenberg, the program's Director and the Chief of Surgical Services. "The objective is to find measures that really make a difference to patients' treatment and recovery, and then to put them into use with the greatest possible speed and efficiency."

In the Pre-Surgical Screening Clinic, Dr. Sandy Bronet examines Gabriele Taddeo in preparation for his operation.

In fact, Dr. Marylise Boutros, a colorectal surgeon who joined the JGH in fall 2012, performs almost all of her operations laparascopically—the exceptions being complicated cases or those in which surgery has previously been conducted repeatedly in the same part of the patient's body. The advantage of minimally invasive surgery, she explains, is that it is particularly suited to patients who are elderly, have other medical problems or have large tumours. Even among obese patients, large, open incisions no longer need to be made in order to reach the affected area.

Dr. Carol-Ann Vasilevsky, JGH Chief of Colorectal Surgery, says she plans to broaden the types of minimally invasive surgery that her Division performs, while gradually

arranging for more surgeons to be trained in these procedures. For instance, in July, she and Dr. Boutros performed the JGH's first trans-anal endoscopic microsurgery, in which laparascopic tools were inserted into the rectum for the removal of large polyps.

Preparing for surgery has also become a much simpler and better-coordinated process since last year, with the launch of the relocated and expanded Pre-Surgical Screening Clinic on the sixth floor of Pavilion A. (A unique opportunity is available to link one's family name with this newly established clinic. For more information, please contact the JGH Foundation.) Previously, patients often had to make more than one visit to the JGH—sometimes to several locations within the hospital—to have their physical condition and suitability for surgery assessed.

Now, thanks to upgrades stemming from Transformational Change, roughly 120 patients pass through the clinic per week, with each person spending an average of about three hours on a comprehensive battery of tests and interviews, says Dana Porubska, Coordinator of Pre-operative Services.

Included in these sessions is a doctor's exam, plus a review of the patient's medical history and current condition; a meeting with a nurse who provides preoperative teaching and explanations about what will occur before, during and after the operation; a review of medication history by a pharmacy technical assistant under a pharmacist's supervision; possible consultations with medical specialists; and such tests as blood/urine and an electrocardiogram. Patients might also be sent for an x-ray and/or pulmonary function test.

Also in the new premises, says Ms. Porubska, are six examination rooms (up from the previous three), three nursing offices (two more than before), a designated area for Pharmacy, and a centralized office for scheduling surgery. In addition, a web-based program is now used by all staff, including the surgeons, to ensure the accuracy of operation-room bookings and the availability of related documents.

"The goal was to provide an efficient and a headache-free experience for the patients," says Ms. Porubska, "and that's exactly what they can now expect. Having surgery is unsettling enough, so it's up to us to make sure that the weeks and days leading up to the operation are as stress-free and supportive as possible."

Waste not, want not in Geriatrics ward

All it took was a single remark from one nurse on one floor. From there, a unique project was born, with improvements that promise to make a difference clear across the JGH. The effect on health care, while not immediately obvious, is nonetheless significant: the hospital will be saving money that can be redirected to patients' needs.

What the perceptive nurse noticed was that certain medical supplies in patients' rooms were being thrown away without being used. Nursing staff felt that by having many types of supplies on hand, they would avoid interruptions during patient care. But once the patient was discharged, any unused supplies had to be trashed. This is because the JGH has a policy stating that in order to prevent the spread of infection, unused disposable supplies must not be removed from a patient's room. And when the patient leaves, they must be thrown out.

A money-saving solution was devised through the Transformational Change program, which aims to reduce waste, heighten efficiency and improve the quality of care at the JGH. In cooperation with the Department of Geriatric Medicine, a project was launched in the Geriatrics ward, with a focus on wound care. A log sheet was developed, on which nurses now record the quantity and types of supplies they have used. Before bringing new supplies into a patient's room, a nurse consults the sheet to determine what has been used and what is actually needed.

"Nurses can now spend more time with the patient instead of planning the supplies they may need," says Rita Di Girolamo, Head Nurse in Geriatric Medicine. "We're saving time, removing the guesswork and ordering less. It's a solution that we're confident will be sustainable, because the whole experience has made all of us more conscious of the problem of waste. Everyone is invested in this project's success, since the idea was our own from the beginning."

Even orderlies have become involved by explaining the situation to well-meaning visitors who have set aside extra supplies that their loved ones may need during their stay. The next step is to bring this positive experience to other areas of the hospital, tentatively starting with the Orthopedics ward, whose staff has voiced an interest in adapting this approach to keep supplies from being wasted.

"We don't have to make huge changes," explains Dr. Lawrence Rosenberg, Director of Transformational Change and Chief of Surgical Services. "We're looking to make small, targeted changes that amount to substantial change in aggregate."

With the demand for seniors' outpatient services growing rapidly, the current Geriatric Outpatient Unit needs extensive expansion and renovation. Improvements will include extra examination rooms, a work space with better layout and design, and a more comfortable environment to permit quicker evaluation, treatment and follow-up services. For more information or to make a donation, please contact the JGH Foundation.

"Nurses can now spend more time with the patient instead of planning the supplies they may need," says Rita Di Girolamo, Head Nurse in Geriatric Medicine. "We're saving time, removing the guesswork and ordering less."

New storage system spells speedier service

Is there a jumbled closet at home that you dread the thought of reorganizing? Then you know how healthcare staff felt in a couple of JGH treatment areas—until it became apparent how much time, trouble and money it was costing to leave things as they were. That led to a makeover in the Internal Medicine ward, which spread to the Emergency Department and yielded extremely encouraging results.

Overhauling storage closets full of medical supplies may not sound terribly exciting, but behind-the-scenes activities like this one—and a host of others—are making a distinct difference to patient care at the JGH. When supplies are easier to find, emergencies can be dealt with much more quickly. Also, nursing staff are freed up to spend more time with patients, instead of searching for mis-shelved items.

These are key elements of Transformational Change, the JGH's hospital-wide program to improve the quality of care and heighten efficiency. This is achieved by identifying and then reorganizing areas and practices that contribute to waste. In the process, funds are spent more wisely, which helps to strengthen the public healthcare system.

In the Internal Medicine ward, JGH specialists in inventory management initially found $1,018 in expired items, as well as overstocked supplies. But once the team finished the makeover, the value of stock on hand was slashed from $13,584 to $4,561. This was achieved by:

- Keeping older supplies in front, so they're used before their expiry date. Items that are frequently used together were also placed side by side.
- Increasing the frequency of stock deliveries. This eliminates the need to hoard supplies that staff fear might not be available later.
- Standardizing the stock. Reducing variety saves money and storage space.

Next, on a much larger scale, came the revamp in the Emergency Department, where a single stock room "feeds" six storage spaces that cover the various Emergency zones. Nurses were closely consulted to identify the supplies that they use regularly, thereby reducing the amount and variety of stock.

As a result, overstocked items worth $5,370 were removed from the six storage areas. Supplies in the stock room will reduced on an ongoing basis until they—and, eventually, the stock room itself—are eliminated altogether. These changes will be carried over to the new Emergency facilities, when the department moves to Pavilion K.

After nurses from elsewhere in the hospital tested the new system, many said they would welcome similar changes on their floors. Comparing the old and new set-ups, Nurse Clinician Laurence MacBeth said medical supplies are sometimes hidden from view in closed drawers. Now, in the open-bin system, "I have a much better view, and the items were well placed."

"The fact that I could stand back and see everything made a big difference," agreed Nurse Clinician Alan Pick. "The length and width of storage space are the most important factors, so in the new area, everything was in full view and easy to find."

Testing, testing …

To test the revamped storage system, nine nurses were brought to the Emergency Department from other areas in the hospital. Each was given the same list of 11 items to find in the old area (left), with its closed drawers and uncategorized bins, and then in the new area (right), with its systematically arranged open-mesh bins. On average, finding the items took 5 minutes and 45 seconds in the old facilities, versus just 2 minutes and 48 seconds in the new space —an average improvement of 48 per cent. Every nurse fared better with the new system.

Taking direct aim to unjam the paper-clogged workplace

Despite all the talk about digital technology ushering in a paperless era, the stacks of paper—and their associated costs—keep inching upwards in some JGH departments.

Elliott Silverman checks the office equipment in the Central Sterilization Department, which has a separate photocopier and fax machine, plus printers in nearby offices. Plans call for all of these units to be replaced by a single, more economical multi-purpose machine.

However, that trend will soon begin to shift into reverse, thanks to a Transformational Change project aimed at slashing the volume of printing and photocopying, with the savings channelled back into patient care.

The solution will be four-pronged, explains Elliott Silverman, Senior Project Manager for Transformational Change:

- New, reasonably priced multi-function printers will be purchased when the expensive photocopier leases expire on current equipment.
- Any employee whose printer is used by no one else will be obliged to give up this equipment and be connected to a networked printer that's used by many members of the department.
- Colour printing will be discontinued wherever possible.
- Anyone who wants to file away a document for reference will be asked to transform it into a pdf (or digital equivalent) instead of making a paper printout that's kept in a drawer.

Mr. Silverman recognizes that adopting these measures will require a major change in mind-set among some staff, "but the hospital's goal is to protect clinical activities. Therefore, we need to work extra-hard to reduce non-clinical spending." Last year, he says, the JGH spent over $100,000 on 18 million pages of paper, as well as $119,000 for colour toner and ink. By contrast, toner for black-and-white copies is approximately one-tenth the cost of colour.

Examples are already being set in high places. Dr. Lawrence Rosenberg, Director of Transformational Change and Chief of Surgical Services, says that in the Executive Director's office, the colour printer has been removed. And when the lease on the photocopier ended several months ago, the unit was replaced with a smaller, cheaper multi-functional machine that prints, copies and scans.

Dr. Rosenberg notes that his own printer, which he alone used to use, has broken down and will not be replaced. In addition, he has acquired a scanner and software to make pdfs and export them to a digital drop-box which can be accessed on any of his portable digital devices.

"I've stopped printing, because I can carry my million pages of paper and books literally in my lab-coat pocket," says Dr. Rosenberg. "I didn't believe I could do it, but I've done it. I wanted to be the guinea pig for this, because I wanted to be able speak to the frustrations and anxiety some members of staff may feel during the transition. I've gone through it and, yes, it has its down-side, but you can get over it. It's more efficient and it's certainly cheaper."

According to Mr. Silverman, safeguards and passwords can be built into the system to ensure that when many people use a single printer, printouts containing confidential material will not find their way into the wrong hands.

He adds, "We need to get in the habit of automatically asking themselves, 'Do I really need to print this?', 'Do I really need it in colour?', and 'Can I keep this document digitally?' In the long run, our patients will thank us for posing those three simple questions."

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Brain stimulation shows promise against aphasia

When transcranial magnetic stimulation was added to the traditional speech and language therapy that patients received within four weeks of suffering a stroke, their recovery from aphasia was three times better than for those who underwent only the traditional therapy, a study led by Dr. Alexander Thiel, a neurologist and researcher in the Lady Davis Institute at the JGH, has found.

"We are entering exciting times when, in the near future, we might be able to combine conventional therapy with non-invasive brain stimulation earlier in the recovery for better outcomes," says Dr. Thiel.

In transcranial magnetic stimulation, a hand-held magnetic coil delivers low-intensity stimulation to the brain's motor cortex and elicits muscle contractions. This was found to be effective against aphasia, a disorder affecting one-third of stroke survivors, in which areas of the brain that control speech and language are damaged. "For decades, skilled speech and language therapy has been the only therapeutic option for stroke survivors with aphasia," explains Dr. Thiel.

Dr. Alexander Thiel

In the study, treatment was provided at a rehabilitation hospital in Cologne, Germany, to 24 stroke survivors with aphasia. Thirteen were given transcranial magnetic stimulation, while the rest received stimulation that researchers knew would have no effect. For 10 days, each patient received one of the two types of stimulation for 20 minutes per day, plus 45 minutes of speech and language therapy per day.

The potent form of stimulation enabled researchers, in essence, to shut down the working part of the brain, so that the stroke-affected side could relearn language. "This is similar to physical rehabilitation where an unaffected area is immobilized with a splint, forcing the patients to use the affected area during therapy," says Dr. Thiel. As a result of this positive outcome, a larger trial, funded by the Canadian Institutes of Health Research, is under way in four sites in Canada and one in Germany.

The generosity of private donors has been crucial in creating the Edmond J. Safra Stroke Centre in 2008, recruiting Dr. Thiel as its Director, and supporting his research. Individuals, corporations and foundations that are interested in furthering the work of Dr. Thiel and other researchers are invited to contribute to the Aging Research Axis in the Lady Davis Institute at the JGH, which conducts leading-edge studies into the biology of aging and age-related disease, particularly strokes.

For more information or to donate, please visit **jghfoundation.org/sections/vldi.html** or call the JGH Foundation at 514-340-8251.

A patient receives transcranial magnetic stimulation.

Investing in a healthy future for all

Private support is vitally important to the LDI and its leading-edge research into the causes and potential treatments for the most common illnesses. Donations supplement the funding that granting agencies provide. This enables the LDI to ensure the continued excellence and growth of existing research programs; recruit first-rank researchers and support their research in priority areas; pursue key areas of research that would not otherwise be funded; and provide critical support to foster new ideas and speed the development and access to novel treatments and therapeutics.

A new feature of the Foundation's Capital Campaign enables donors to target a particular area of LDI research, such as aging, cancer or HIV/AIDS, to support specific researchers and their infrastructure for a specified period. For more information or to make a donation, please visit jghfoundation.org and click on the Campaign tab, or call the JGH Foundation at 514-340-8251.

Care for all Quebecers.

Tracing obesity's economic roots

As obesity reaches epidemic proportions, a unique study has shown that farm subsidies in the United States are enabling consumers to more easily afford the very foods that contribute to extreme weight gain.

The research, led by Dr. Mark Eisenberg, a JGH cardiologist and an epidemiologist in the Lady Davis Institute (LDI) at the JGH, is considered especially significant in light of the debate in the U.S. Congress over a new farm bill that will determine agricultural policy for the next five years.

"Tackling the policies that translate into food production and availability could be the most widespread preventive measure to address the obesity epidemic," wrote lead author Caroline Franck, an LDI research assistant, in a recent paper in the *American Journal of Preventive Medicine.*

While many factors contribute to obesity, Ms. Franck and the co-authors note that grocery stores and restaurants sell high-fat and sweetened foods whose ingredients are lucrative to grow and can be sold cheaply, thanks to government subsidies.

Recognizing that farm subsidies are an important safety net for a volatile industry, the study proposes that agriculture policy-makers take public health into account when identifying how subsidies are dispensed. They also recommend that farmers be encouraged to grow fruits and vegetables instead of the types of crops that are used to produce sweeteners and hydrogenated oils.

Dr. Mark Eisenberg and Caroline Franck

"A revision of agricultural priorities is in order," said Ms. Franck. "Public health interventions will remain limited in their impact until they can inform decisions that are made at every level of the American food chain, from growers to consumers."

Drug safety studies yield revealing results

Previous suspicions to the contrary, a class of drugs that is used in treating gastric acid-related conditions does not increase the risk of hospitalization for pneumonia. That conclusion is contained in the latest major study coordinated by a national drug research network headquartered in the Lady Davis Institute (LDI) at the JGH.

The study, led by Dr. Kristian Filion of the LDI, analyzed an international database of over 4 million patients, with special attention to drugs known as proton-pump inhibitors. The research, described in an article in the journal *Gut*, was undertaken as part of the Canadian Network for Observational Drug Effect Studies, under the leadership of Dr. Samy Suissa, Director of the Centre for Clinical Epidemiology.

The Network was established in 2011, with a $17.5 million investment from the Canadian Institutes of Health Research, because some prescription drugs may have adverse side-effects that become apparent only after they have cleared regulatory hurdles and are in general use. For this reason, epidemiologists across the country are sifting through mountains of information about patients' experiences with their medications. No medical file contains the patient's name; each person is known only by a scrambled identification number, which the epidemiologists do not even see.

This type of research led to the Network's first major revelation that high-dose statins, which are extensively used to lower cholesterol, elevate the risk of acute kidney injury. This discovery was published in the *British Medical Journal* and attracted widespread international media coverage.

An investigation into atypical antipsychotic drugs and the risk of diabetic ketoacidosis, a serious complication of diabetes, has been completed and the results will be published shortly. Three studies are currently under way into:

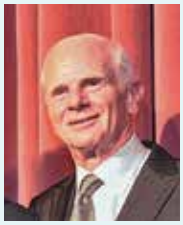
- high-potency statins and the risk of diabetes in patients with occlusive vascular disease
- the risk of congenital malformations resulting from the use of isotretinoin (a treatment for severe acne) during pregnancy
- anti-depressant drugs and the risk of renal failure

"Our network provides access to the health records of over 40 million people to accurately assess therapeutic risks and benefits of many drugs used by Canadians," says Dr. Suissa. "We use cutting-edge research methods, ensuring that our studies find an audience in the best scientific journals and give healthcare professionals the confidence to use our findings to improve patient care."

NEWSMAKERS

HONOURED BY THE QUEEN

Three of the Jewish General Hospital's past and present leaders were recently awarded the Queen Elizabeth II Diamond Jubilee Medal, created to mark the 60th anniversary of the Queen's accession to the throne. The commemorative medal, awarded to distinguished citizens who have contributed significantly to Canadian society, has been presented to:



Stanley K. Plotnick, JGH President from 2003 to 2005, continues to devote his time and expertise to the hospital as a member of the Board of Directors and the President's Advisory Committee. In the past year, Mr. Plotnick has also been honoured for his exceptional long-term commitment to Israel and the Jewish people. He is on the Executive of Keren Hayesod-United Israel Appeal (a non-profit organization that furthers the national priorities of the State of Israel and world Jewry), a board member of the Jewish Agency for Israel (which serves as the official link between Israel and Jewish communities around the world), Montreal Chair to restructure the *Canadian Jewish News*, and Vice-Chair of the Jerusalem Foundation. In 2007, Mr. Plotnick received the JGH's highest honour, the Distinguished Service Award, in recognition of the successes that came to fruition during his term as President, including the development of the Segal Cancer Centre; the launch of the Weekend to End Women's Cancers; the purchase of the property on which Pavilion H is being built; and acquisition of a PET/CT scanner.

Henri Elbaz, JGH Executive Director from 1992 to 2008, remains a valued source of guidance and insight to the hospital. He also serves as a healthcare consultant to the provincial government, while working in a volunteer capacity on behalf of the community and Israel. Mr. Elbaz began his JGH career in 1976 and rose through the ranks to become Executive Director 16 years later. In that capacity, he oversaw a period of enormous growth and great diversification of patient services, including construction of the Segal Cancer Centre and the acquisition of a neighbouring property that permitted the development of Pavilion H and the proposal to build Pavilion K. On his retirement from the JGH, Mr. Elbaz was praised by Premier Jean Charest as "a man of vision and action, an esteemed administrator, a team player, and a man of values and conviction."

Dr. Apostolos Papageorgiou, JGH Chief of Pediatrics and Neonatology, is an internationally renowned and award-winning expert in his field. This past June, he was appointed to the Education Committee of the World Association of Perinatal Medicine at the World Congress of Perinatology in Moscow, where he was an invited speaker. Dr. Papageorgiou, a Professor of Pediatrics, Obstetrics and Gynecology at McGill University, joined the JGH in 1974 as Director of Neonatology, a position he continued to hold when he was appointed Chief of Pediatrics in 1988. From 1995 to 2003, he also served as Acting Chief of Obstetrics and Gynecology at both the JGH and St. Mary's Hospital. In 2011, Dr. Papageorgiou was named "Doctor honoris causa" by the University of Athens, and in 2007 he was granted honourary membership in the Canadian Medical Association in recognition of his many contributions to Canadian medicine.

CONGRATULATIONS!

Valérie Vandal, Associate Director of Nursing for Surgery at the JGH, has received the Jeanne Mance Award from the Regional Order of Nurses of Montreal/Laval. According to the organization, the award recognizes a nurse in a management position in the healthcare network "whose leadership, achievements and professional and personal achievements have contributed to the development of nursing, as well as to the improvement of health care for patients, through her positive influence on her teams."

Dr. Alan Spatz, JGH Chief of the Department of Pathology and an internationally recognized expert in melanoma in the Lady Davis Institute at the JGH, has been promoted to full Professor of Pathology and Oncology at McGill University.

Three major honours have been or are about to be bestowed on **Dr. Brett Thombs**, a researcher in the Lady Davis Institute at the JGH. Dr. Thombs, an Associate Professor of Psychiatry at McGill University, has been awarded $300,000 by the Arthritis Society to support his work as Director of the Scleroderma Patient-Centred Intervention Network. This organization develops, tests and delivers psychosocial and rehabilitation services to sufferers of scleroderma, a rare rheumatic disease. In October, Dr. Thombs will receive the Distinguished Scholar Award from the Association for Rheumatology Health Professionals at the association's annual meeting in San Diego. This award recognizes a non-rheumatologist who has made a major scholarly contribution to the field. And in November, the Academy of Psychosomatic Medicine will present Dr. Thombs with its 2013 Research Award at its conference in Tucson, Arizona, where he will deliver a plenary lecture related to his work on depression screening in medical settings.

Care for all Quebecers.

Dr. John Antoniou, a surgeon in the JGH Department of Orthopedics and a researcher in the Lady Davis Institute at the JGH, has been named a National Grant-holding Investigator by the Quebec Research Fund - Health Care. Dr. Antoniou, a Professor of Surgery at McGill University, is the first orthopedic surgeon to receive this award, the first Quebec surgeon to receive it in at least five years, and one of only four such researchers at the national level this year. Individuals, corporations and foundations that are interested in supporting the work of Dr. Antoniou and other researchers are invited to contribute to the Aging Research Axis in the Lady Davis Institute at the JGH, which conducts leading-edge studies into the biology of aging and age-related disease, particularly bone aging. For more information or to donate, please visit jghfoundation.org/sections/vldi.html or call the JGH Foundation at 514-340-8251.

Three scientists in the Lady Davis Institute at the JGH have been awarded grants, each worth $200,000 over two years, from Prostate Cancer Canada. The 2013 Movember Discovery Grants will support the researchers' pursuit of significant, new directions in prostate cancer research.

- **Dr. Rongtuan Lin** is exploring the use of an oncolytic virus in combination with a small molecule to develop a novel treatment. Resistant prostate cancer cells respond more easily to the therapeutic effects of the oncolytic virus when combined with small-molecule drugs.
- The lab of **Dr. Mark Trifiro**, JGH Chief of Endocrinology, has identified new proteins that interact with androgen receptors, a hormone that has been identified with the growth and progression of prostate cancer. His project, led by Dr. Miltiadis Paliouras, is trying to identify the androgen receptor signaling pathways that lead normal cells to mutate into cancer.
- **Dr. Jian Hui Wu** is working on a new chemical inhibitor of the ETS oncoprotein, which is over-expressed in half of all prostate cancer patients. Dr. Wu has discovered a novel small molecule that inhibits the function of this oncoprotein and could, therefore, lead to the emergence of a new class of anti-prostate cancer drugs.

Henry Mietkiewicz (left) and Glenn J. Nashen with Judy Brown, President of the Health Care Public Relations Association.

Megan Martin

Pulse has done it again! For the third time in four years, the JGH's in-house magazine has been named the best staff publication in Canada by the Health Care Public Relations Association (HCPRA). At the HCPRA's annual conference in Halifax in June, Pulse scored a first-place Hygeia Award in the Internal Publications category, as it did in 2010 and 2011. *Pulse*—edited by **Megan Martin** and **Henry Mietkiewicz** of the Department of Public Affairs and Communications—also picked up a second-place Hygeia last year, making this year's win the fourth in a row. Altogether, Public Affairs and Communications has received 15 awards over the past 11 years from healthcare-related organizations in Quebec and elsewhere in Canada.

"This honour confirms the devotion of our entire team to the JGH and our passion for communication," said **Glenn J. Nashen**, JGH Director of Public Affairs and Communications and a member of the HCPRA's Executive Committee. "Every member of JGH staff plays an integral role in patient care, and *Pulse* continues to keep them informed and portray their sincere commitment to patients from across Montreal and Quebec."

"The Department of Public Affairs has demonstrated, once again, how committed it is to maintaining and improving the quality of communications inside and outside the hospital to help the JGH strengthening the healthcare system for the benefit of all Quebecers," said **Dr. Hartley Stern**, Executive Director.

WELCOME

Dr. Annabel Chen-Tournoux, an expert in echocardiography and cardiometabolic diseases, has joined the JGH Division of Cardiology. In addition to her duties in the echocardiography lab, she is helping to establish a strong cardiology presence in the JGH Cardiovascular Prevention Centre. Dr. Chen-Tournoux received her M.D. at Harvard University, followed by residencies in internal medicine and cardiology and a fellowship in echocardiography at the Massachusetts General Hospital. She also spent three years in Paris in the Senior Program Office of the Leducq Foundation, which supports research and development in new technology in cardiac and neurovascular sciences. Dr. Chen-Tournoux's own research focuses on cardiac and neurovascular imaging, as well as cardiometabolic diseases such as obesity.

Dr. Nathalie Saad has joined the JGH Division of Respiratory Medicine and will hold a shared position with Mt. Sinai Hospital to strengthen the existing ties between the hospitals. Dr. Saad has a particular interest in integrated care, managing patients who have chronic obstructive pulmonary disease, and improving patients' compliance in exercising during their post-pulmonary rehabilitation. Dr. Saad pursued a residency in respirology at McGill University, followed by a post-graduate fellowship in pulmonary rehabilitation and chronic respiratory diseases. Afterward, she earned an executive MBA degree at HEC-McGill.

NEWSMAKERS

IN MEMORIAM

Morton Brownstein

The Jewish General Hospital, the JGH Foundation and everyone in the JGH family are deeply saddened by the passing on May 23 of **Morton Brownstein**, C.M., President of the hospital from 1987 to 1989, President of the JGH Foundation from 1986 to 1988, and Chair of many hospital fund-raising campaigns. Heartfelt condolences are extended to Bernice, Michael, Janis, Cheryl and the entire Brownstein family.

Mr. Brownstein, 85, was affectionately known to all as "Mr. JGH" for his rare combination of warm wit and keen professional sensibilities that made him the hospital's *de facto* goodwill ambassador. He was widely admired as the Co-Chair of the capital campaign that raised more than $200 million between 2002 and 2009. In addition, in 1986, his strong belief in improving patient care led to development of the Humanization of Care Committee, which ensures quality of care at every level within the JGH. In recognition of this achievement, as well as his many years of service, Mr. Brownstein was awarded a special JGH Lifetime Achievement Award during the hospital's 75th anniversary celebrations in 2009.

"This is a great, great loss to all of us," said Edward Wiltzer, who joined Mr. Brownstein as Co-Chair of the Power to Heal campaign that concluded four years ago. "Morty was nothing short of a consummate professional. Not only was he a delightful and friendly person, he was extremely well respected for his business acumen. That's why, as a fund raiser, he was the type of person no one could say 'no' to."

Based on his business skills as owner and President of Brown's Shoes, a leader in the footwear industry, as well as his achievements as an entrepreneur, volunteer and philanthropist, Mr. Brownstein was appointed to the Order of Canada in 2004.

"His generosity with time, energy and money is legendary," said Governor General Adrienne Clarkson in announcing the appointment. "He has been particularly active in fundraising activities for the Jewish General Hospital and the Montreal Association for the Blind, among others. In addition, his company regularly donates an exceptionally generous percentage of its profits to various community organizations."

For similar reasons, Mr. Brownstein received the JGH's highest honour, the Distinguished Service Award, in 1998.

Mr. Brownstein began volunteering at the age of 13, doing what he could for the soldiers in World War II and later for the veterans when they came home. Though active in business, he devoted countless hours to volunteer activites—for example, serving as President of the United Israel Appeal, Chair of the fund-raising campaign of the Combined Jewish Appeal, and a member of Allied Jewish Community Services.

He began his association with the JGH in 1979 as a member of the Budget and Finance Committee and went on to become President of the Board. In between, he served as Honourary Treasurer of the Board, a member of the Executive Committee and Chair of the Patient Care Committee.

In a 1982 interview in *JGH News*, Mr. Brownstein noted that his commitment to the hospital stemmed from his unwavering belief in the "climate of excellent cooperation" among lay leaders and all members of staff. He added that uncertainty and a tough, uphill struggle are inevitable in health care, "but I have every confidence that they will be overcome, that our standards will always be maintained, and that our progress will continue."

Bernard J. Finestone

The Jewish General Hospital and the JGH Foundation mourn the loss on May 22 of HCol. **Bernard J. Finestone**, E.M., C.D., C. de G. (Ret'd), who served as JGH President from 1980 to 1982. The JGH extends its sincere and heartfelt condolences to Rita and the entire Finestone family.

Mr. Finestone was 14 years old when he was chosen to be among the Boy Scouts in the honour guard of Lord Bessborough, the Governor-General of Canada, at the ceremony to open the JGH on October 8, 1934. Educated at McGill University and Sir George Williams University, Mr. Finestone served in the 9th Armoured Regiment of the Canadian Army during World War II, attaining the rank of Captain. Having sustained severe wounds in May 1944 during a battle in Rome, he underwent three years of treatment in a military hospital.

After his recovery, Mr. Finestone completed his education and joined his father's chartered insurance brokerage, becoming President of the company in 1949. Over the years, he held numerous volunteer positions, including President of the Montreal Port Council, President and Honourary Chairman of the Montreal Board of Trade, President of the St-Henri-Westmount Progressive Conservative Riding Association and Vice-President of Congregation Shaar Hashomayim.

However, it was the JGH that held a special place in his heart. In the mid-1950s, he was approached by Peter Bronfman, son of the hospital's founding President, Allan Bronfman, and was informed that the JGH had grown so large that Executive Director Samuel Cohen could no longer handle all of the purchasing by himself. Thus, Mr. Finestone became a member of the new Purchasing Committee, followed by involvement in additional committees, all leading up to his Presidency.

During his term, Mr. Finestone was instrumental in organizing the JGH's milestone Mirabel Conference, which was a catalyst for the development of new programs throughout the hospital. His leadership in instituting sometimes painful budgetary cuts led to recognition of the JGH by the provincial government as one of the most efficient hospitals in Quebec.

In 2009, in an interview in *JGH News*, Mr. Finestone wondered what those attending the hospital's opening ceremony might have thought if they could see the JGH today. "It has grown larger and more sophisticated than I or anyone could have imagined on that sunny day 75 years ago," he said. "But the spectators of 1934 and the people of today would have agreed on one thing: A dream has been realized and the people of Montreal and Quebec are all the more fortunate for it."

Care for all Quebecers.

Tight teamwork gives birth to enhanced obstetrical care

The delivery was not going smoothly. Pressure was mounting by the minute, and stress levels were creeping upward among the birthing team. After repeated attempts at delivery, nothing seemed to be working. Finally, realizing there was no alternative, Line Pinsonnneault announced what the next step would be: it was time to use forceps.

Except that Ms. Pinsonnneault is not an obstetrician, but Head Nurse in the Family Birthing Centre, and this decision was not one she was able to make—not in real life, anyway. But at that moment, deeply immersed in a role-playing exercise, she came very close to sensing the weight of responsibility that an obstetrician might experience during a far-from-straightforward delivery.

"I can now honestly say, 'I really get it,' that a doctor's stress is at a much different level," says Ms. Pinsonnneault, recalling the session in the MORE OB (Managing Obstetrical Care Efficiently) program, which improves patient safety by building more cohesive teamwork. "I know I wasn't feeling exactly what a doctor would, but it brought me very close to experiencing that kind of situation—one that I've been in as a nurse—from a much different perspective.

"When a doctor is using forceps, it might seem to the rest of us that she's just taking her time. But when we role-play, we see how important it is to be sure the forceps are placed in just the right position. This has helped me to be more effective as a nurse, because I'm better able to anticipate the doctor's moves and I'm ready to do what I can."

In this MORE OB exercise, obstetricians can play Post Partum personnel, midwives can be family practitioners, and so on—and it's just one of the many emergency drills, training sessions and educational seminars that foster closer cooperation and tighter teamwork in a wide range of high-risk scenarios. Although the three-year program has just concluded, MORE OB endures in the transformed working relationships of dozens of JGH staff. As new employees come aboard, they absorb a culture that has already been strengthened by MORE OB principles.

"Throughout the process, the emphasis has been on increasing patient safety and reducing risk by giving participants the knowledge and ability to communicate more easily and efficiently," says Kimani Daniel, a Clinical Nurse Specialist and JGH Coordinator of MORE OB, which was developed by the Salus Corporation in cooperation with the Society of Obstetricians and Gynaecologists of Canada.

"Each member of the team brings his or her own special skills and expertise. That means everyone has to be willing and able to speak up at any time if they spot something that doesn't seem right. It also means that other members of the team have to pay serious attention to that person's comments."

Ms. Daniel explains that while MORE OB's principles could be applied to healthcare teams in other specialities, they're especially suited to staff in delivery and birth, whose fast-paced, high-stress environment holds the potential for risk that can arise in the blink of an eye. And since the team can consist of so many different types of healthcare professionals, the need for a unified approach is essential, she says.

During a MORE OB workshop, Nurse Clinician Kristen Desouza (centre) uses an obstetrical manikin to practice procedures for high-risk delivery, under the supervision of Line Pinsonneault, Head Nurse in the Family Birthing Centre, and Dr. Cleve Ziegler, JGH Director of Gynecology.

Even in presentations to staff, the positive changes under MORE OB have been significant, notes Valerie Frunchak, Associate Director of Nursing for Training and Development and Mental Health. "During morning obstetrical rounds, it used to be unusual for anyone but doctors to present. Now the playing field is level, with nurses actively involved.

"And even though our hospital has always had good relations with midwives, this has brought us even closer. Our sessions at the midwives' *Maison de naissance* has gone a long way toward helping the other disciplines understand the midwives' approach and the contribution they make."

This is similarly true of physicians, "who have traditionally viewed midwives with suspicion," says Dr. Louise Miner, JGH Interim Chief of Obstetrics-Gynecology. "Now it's accepted that we work together for patient safety, rather than having opposing philosophies of obstetrical care."

This has contributed to a welcome dismantling of the outdated healthcare hierarchy, adds Dr. Miner. "'Hierarchy' implies that the person at the top of the pyramid is solely responsible for everything that happens to the patient. Getting rid of the hierarchy means everyone is responsible, from the unit agent to the medical students to the residents to the nurses to the doctors. We don't want to hear, as we did 10 or 15 years ago, 'That's not my job.'"

Even if the results for some patients are less than ideal, MORE OB has introduced ways of minimizing the recurrence of an adverse event. "After something has happened, we now take five minutes to discuss what we could have done better or whether there may have been a malfunction in the equipment," explains Verna Grizzle, a nurse in Obstetrics-Gynecology and Co-Chair of MORE OB.

"This is also a big help for new nursing staff, because it provides them with a more solid foundation and it reassures the rest of the team that the knowledge is being passed along. What they learn from the start—and what all of us are continually reminded of—is that the patient's safety comes first, and working as a real team is the best way to make it happen."

Making every kilometre count in a triumphant Ride

In its fifth dynamic year, the Enbridge Ride to Conquer Cancer cruised to victory on July 6 and 7, as 1,778 cyclists and over 380 crew members from across the province raised $6.3 million to fund cancer research, treatment and prevention. The demanding but rewarding 230-kilometre trek across southern Quebec brought the grand total of the Ride's five years to more than $32 million.

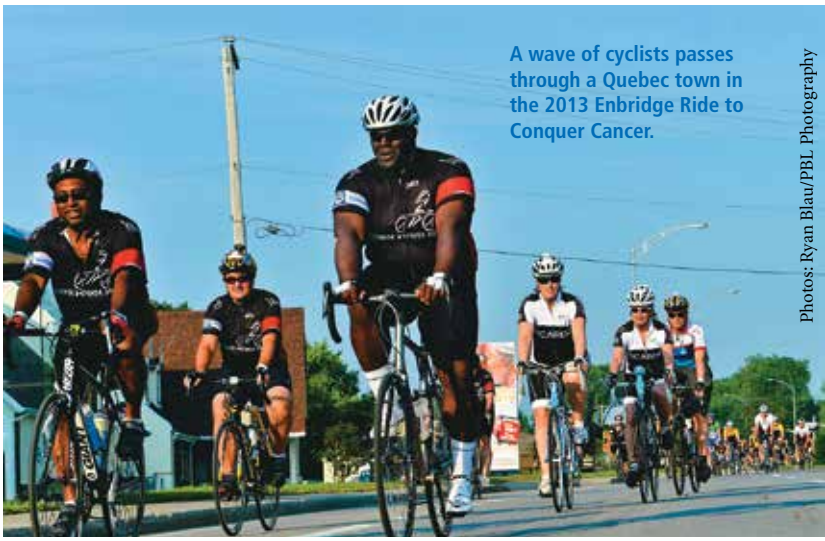
Organized by the Jewish General Hospital Foundation, this was an event for all Quebecers, reflecting strong support for the JGH in caring for patients from across Montreal and Quebec. The event also exemplified the partnerships that the JGH has forged with healthcare institutions across the province, with proceeds supporting not just the Segal Cancer Centre at the JGH, but the University of Quebec Hospital Centre Foundation, the Trois-Rivières Regional Hospital Centre Foundation and the Gatineau Health and Social Services Centre Foundation.

For Stuart McEachan, the Ride proved to be "trying and emotional", his most physically demanding challenge since he was diagnosed with colorectal cancer in fall 2011. Mr. McEachan said the illness took him by surprise, because he seemed in good health and he learned of the cancer only after a routine colonoscopy.

While visiting his oncologist, he noticed a poster for the Ride "and as soon as I saw it, I knew I wanted to particpate and complete that route. It was a goal I gave myself right off the bat." That meant practicing on a stationary bike in his living room for 15 to 20 minutes on days when he could tolerate the exertion. Mr. McEachan and his wife, Wendy, also credit Hope & Cope for invaluable advice and support that helped him stay in shape.

Though determined to participate, Mr. McEachan was not well enough for the 2012 Ride, but he and Wendy both completed this year's event, which he described as "a celebration. It makes you realize that the future could have been so different. I know I've had a lot of luck to be where I am today and to have my prognosis come out this way. It's made me incredibly grateful to be on this journey."

Also among the Riders was Phil Anzarut, who was profiled in the last issue of *JGH News*. Mr. Anzarut's Bikus Urachus team was Number 1 in fundraising among non-corporate teams—and fifth-highest over all in Quebec—with at least $115,000 from more than 970 donors.

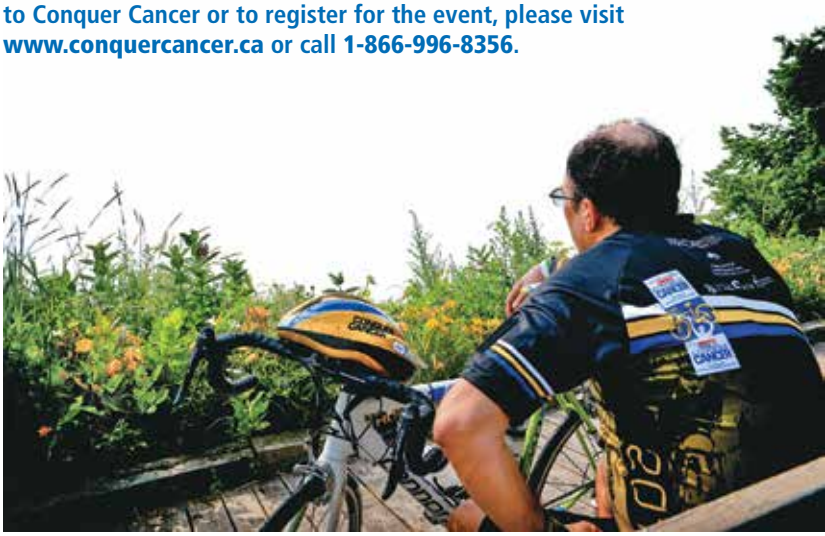


A wave of cyclists passes through a Quebec town in the 2013 Enbridge Ride to Conquer Cancer.

Photos: Ryan Blau/PBL Photography

The weather was comfortably warm on both days, with sun on Saturday, some clouds on Sunday and wind at the Riders' backs throughout the weekend. Enthusiastic participants set off from Repentigny on Saturday morning and rode to the overnight camp in Trois-Rivières, where they enjoyed hot meals and entertainment. On Sunday, they arrived at the finish line in Saint-Augustin-de-Desmaures, just outside Quebec City, to a jubilant welcome from relatives, friends and supporters.

For information on how you can be part of the 2014 Enbridge Ride to Conquer Cancer or to register for the event, please visit www.conquercancer.ca or call 1-866-996-8356.



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Participants in the Weekend were walking on air

Though the route ran through Montreal, the location seemed more like Cloud 9 for participants in the ninth annual Pharmaprix Weekend to End Women's Cancers on Aug. 24 and 25. Altogether, the 1,525 tired but determined walkers raised a remarkable $3.1 million to support the Segal Cancer Centre at the JGH in its research, prevention, diagnosis and treatment of breast and gynecologic cancers.

Combined with the previous eight Weekends, the grand total comes to nearly $53 million.

As in previous years, well-wishers by the hundreds turned out along the 60-kilometre route to cheer for the walkers, hold up hand-written signs of encouragement, shout out words of thanks, and offer refreshing drinks and snacks. Among the highlights were an in-town route on day 1 and a walk past the JGH, both returning after a one-year absence. The latter was especially welcome for many participants, since the hospital played such a key role in their own cancer experiences.

On a warm, sunny Saturday morning, the walkers streamed happily out of a new venue, the Villa Maria School in NDG, and then returned there later in the day for supper, entertainment and a camp-out in tents. On Sunday morning, after a stirring daybreak performance by a spirited bagpiper, they headed back out in ideal summer weather, and later triumphantly crossed the finish line amid the laughter of relief and tears of joy.

For Olga Assaly, the walk was her sixth since 2006, but she said it felt every bit as fresh and exciting as her first outing. On that first occasion, she was chosen to be among the speakers at the opening and closing ceremonies, where she explained to the crowd how the proceeds from the 2005 Weekend had made a difference to her treatment for breast cancer at the JGH.

This year, Ms. Assaly said, she originally intended only to raise funds, but not to walk. However, in the weeks leading up to the event, she got so swept up in the energy and enthusiasm of friends and colleagues who were planning to walk that she finally felt she had to join in.

"At every pit stop, people were there with words of encouragement that kept me going, no matter how tired I felt," she said. "It made me think of 2006 when I was up on the stage. Then and now, people responded to what I was saying and doing, with waves of emotion and support coming toward me."

This was only one leg of a much longer journey, which will continue for the many walkers who have already signed up for next year's event. In 2014, the Weekend will celebrate its 10th anniversary in Montreal, with many special surprises planned to mark this momentous occasion. For information or to register, visit **www.endcancer.ca** or call **514-393-WALK (9255)**.

Photos: Ryan Blau/PBL Photography

Exuberant participants in the Pharmaprix Weekend to End Women's Cancers jump at the chance to show their support for the JGH.

The sky's the limit for Weekend walkers in their fight against women's cancers.

www.endcancer.ca 514-393-WALK (9255)

Bringing the patient's perspective to quality improvements

Agneta Holländer (left) and Markirit Armutlu review documents on improvements to safety and the quality of care at the JGH.

Though widely known for the selflessness of its army of 1,000 blue-jacketed volunteers, the JGH has also come to rely on numerous other individuals whose contributions, at first, may not be quite so apparent. Case in point: Agneta Holländer, who gives of her time to bring a patient's perspective to hospital groups intent on improving the safety and quality of hospital care.

Since retiring in 2011, Ms. Holländer has joined the JGH's Quality Program as a volunteer community representative and has participated alongside members of hospital staff members on committees involved in:

- an analysis of the Emergency Department's processes for prescribing opioids
- an analysis of processes that result in foreign objects inadvertently ending up in the hospital's laundry
- ensuring that patients are properly identified using double identifiers in all instances of treatment and care
- developing an integrated hospital-wide framework for supporting ethical practice

She has even joined a group that will help to choose the works of art that will be displayed in the public spaces of Pavilion K when construction of that new critical-care wing is completed. Since art has been shown to be of benefit in supporting the emotional and spiritual well-being of patients and their families, this activity, too, is in line with Ms. Holländer's goal of enhancing patient care.

As a JGH patient herself, Ms. Holländer says she has witnessed the considerable effort that healthcare and non-clinical staff put into their work, and it's this dedication that motivated her to apply her professional skills to help take the hospital's level of care even higher. With expertise in occupational health, safety and risk management, she served as Executive Director of the Canadian Society for Fertility and Andrology in the 6½ years before retiring, as well as working in the pulp and paper, transportation and mining sectors.

"In a sense, a hospital is like any other high-risk industry," Ms. Holländer says, "and we know from experience that when something needs to be fixed, it's the system that should be fixed and not just the spot where the problem shows up. Unfortunately, it's human nature to want to find quick solutions, instead of taking the time to look for systemic factors behind the conditions that cause an incident to occur. I'm trying to contribute by making sure we retain system-wide thinking to identify the problem and provide the solution."

"Agneta is the type of volunteer who keeps us grounded and brings us back to basics," explains Markirit Armutlu, Coordinator of the JGH Quality Program. "Sometimes members of staff get really caught up in the details of what they're trying to accomplish, and it takes someone like Agneta, who relies on her professional expertise, to remind us of practicalities and realities from a patient's point of view. She brings us into focus by asking questions that are naïve—in the positive sense of the word—that clinical experts may not always consider."

"Criticizing is easy," adds Ms. Holländer, "but in health care, as in all activities, when things go wrong, it's simply not enough to blame, criticize and kick up a storm. There comes a point where you have to step forward and be part of the solution."

Volunteers—many of whom are or have been JGH patients who appreciate the quality of their care—are a big part of what makes the hospital so special. They provide essential support to the Foundation by donating their time and talent to help with day-to-day operations, events, special activities and projects. Whatever they choose to do is greatly appreciated and has a real effect on health and well-being, especially in these times of budget cuts.

To learn more about becoming a volunteer at the JGH Foundation, please contact Siobhan O'Brien at 514-340-8222, extension 3069, or siobhanobrien@jgh.mcgill.ca. The hospital (514-340-8222 ext. 5983 or 5984) and Auxiliary (514-340-8216) would also welcome you as a volunteer.

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Thierry Jabbour
Investment Advisor
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Thierry.jabbour@manulifesecurities.ca

Mock-up of patient's room offers a peek into Pavilion K's future

Although patients' rooms in Pavilion K aren't scheduled to open until at least 2015, a temporary mock-up of a typical room was shown to staff this past spring in a special area in the new pavilion.

Mock-up of a patient's room in Pavilion K, notable for its airy environment, ample space and a design that limits the spread of infection.

The room and its accompanying washroom were prepared to give employees a clearer idea of what to look forward to. Instead of just inspecting blueprints or architects' drawings (as they had previously done), staff saw the actual layout and were better able to make comments and suggestions to members of the JGH team overseeing the transition to Pavilion K.

The rooms in the new critical-care wing will feature a bright, airy environment, ample space for visitors and the latest medical technology, convenient storage closets and easy-to-clean surfaces. Every room in Pavilion K will be a single room in order to sharply reduce the spread of infection and to provide patients with maximum privacy. To see the mock-up, please visit www.youtube.com and type "JGH mock-patient room" in the search field.

Pavilion K is the cornerstone of a concerted effort—by the government, the JGH and Quebecers—to improve access to life-saving treatment, reduce waiting times, and continue to provide the highest level of patient care. The generosity of donors will be critical at all stages of the project to ensure that this critical-care swing reaches its full potential on behalf of patients from across Montreal and throughout Quebec.

More than $50 million in private funding must be secured to outfit the new operating rooms and intensive care units with the latest and most sophisticated medical technology. This funding will also furnish all of the private rooms with state-of-the art beds, equipment and furniture, and it will meet many other needs not funded by the government. For more information or to donate, please visit jghfoundation.org/sections/vkpav.html or call the JGH Foundation at 514-340-8251.

JGH TV

Now there's another way for the JGH to come alive! Tune in to JGH TV for informative and entertaining video news on such topics as robot-assisted surgery, readiness for emergencies, and Dr. Clown. It's yours to enjoy at jgh.ca/jghtv.

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Preventive measures are of key importance in preventing obesity

For many general practitioners, preventing illness can be more rewarding than curing it, says Dr. Michael Malus, Director of the JGH Goldman Herzl Family Practice Centre.

Kicking off the most recent series of lectures in the JGH Mini-Med School, Dr. Malus told the audience that "as a doctor, I can get some satisfaction out of making the correct diagnosis, but it's even more satisfying to prevent illness in the first place. That's the central task of family medicine."

Dr. Malus was among the speakers in the 11th annual JGH Mini-Med School this past spring, which focused on various aspects of family medicine. As always, remarks by the JGH experts were geared to a general audience, whose members received diplomas and the honourary title of "mock-tor" at the end of the series.

Dr. Michael Malus

At the final Mini-Med lecture, Cecile Klein received a cake to celebrate her 106th birthday. Mrs. Klein, who has attended every Mini-Med series since 2003, was accompanied by her daughter, Harriet Nussbaum (rear row, right).

Dr. Malus said a leading priority is preventing obesity, since many children and adolescents are seriously overweight, and more people in their 30s are suffering heart attacks. He noted that the average Canadian now consumes about 40 pounds of sugar per year, compared to four pounds per person per year a century ago.

Not only is exercise of key importance in weight loss, Dr. Malus said, but a recent Ontario study into Alzheimer's disease estimated that regular exercise could contribute to a reduction of up to 40 per cent in an individual's risk of getting the disease.

Some Mini-Med highlights:

Dr. John C. Kirk, founding Director of Herzl's Home Care Program for the elderly, said home visits can sometimes be time-consuming and uneconomical for doctors, but they provide valuable information about the patients' ability to care for themselves, avoid injury, eat properly and take medication correctly. These details may not always emerge as easily during office check-ups.

Dr. Silvia Duong, a clinical pharmacist at Herzl, explained that while some natural health products may be of value to certain consumers, these products are not automatically safe for everyone. She recommended that individuals who take medications speak with a healthcare provider to assess the safety of starting a new natural health product.

Dr. Perry Adler, Associate Director of Herzl's Teen Health Unit, said teenagers are sometimes incorrectly perceived by society as being "dangerous and mysterious creatures" or "thugs and delinquents." However, he said, teenagers deserve understanding and support, adding that recent research has discovered physiological reasons why teenagers do not think like adults.

The JGH Mini-Med School thanks its sponsors for their generous support.

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AUXILIARY NEWS

Striding confidently into the future

Linny Blauer

Phyllis Karper

As we begin to put together plans for our new term of office, we are more confidant than ever about relying on the lessons of the past, while feeling excitement over future options. We continue to be open to imaginative, new programming as we strive for successful fundraising.

In particular, we are proud of attracting a vibrant group of young women to our organization. They have far exceeded our expectations, with some taking on leadership roles, and others organizing and supporting the many Auxiliary events. Wherever their interests lie, they never fail to bring their enthusiasm and youthful energy with them.

To anyone thinking about joining The Auxiliary's ranks, we welcome you! After all, each of us was a newcomer at some point. Together there is still so much more we can accomplish for our beloved hospital.

– Linny Blauer and
Phyllis Karper Co-Presidents

ON THE HORIZON

October 23
Menus for the Mind Series
Movie screening of
Scatter My Ashes at Bergdorf's

October 25, 27, 28
Fall Fair and raffle
Samuel S. Cohen Auditorium, Pavilion A
All-new merchandise, collectibles, vintage furs and bargains!
Proceeds to purchase fibroscan equipment for the JGH Division of Gastroenterology

November 4
Blood donor clinic
Samuel S. Cohen Auditorium, Pavilion A
9:30 a.m. - 4:00 p.m.

December 5
Holiday boutique sale
Main Lobby 9:30 a.m.- 4:00 p.m.

Private parts go public

Understanding the intimate and sometimes surprising facts behind "Private Parts: His & Hers" made for an evening that was not only informative, but highly entertaining. The Auxiliary's Next Generation Committee organized and welcomed the speakers—sex therapist and radio host Dr. Laurie Betito, urologist Dr. Andrew Steinberg, radio host Ted Bird, and fitness trainers Laura Cousineau and Chris Ince. Proceeds benefited the JGH Neonatal Intensive Care Unit.

"Private Parts: His & Hers" piqued the interest of many he's and she's in the audience, including Shari and Gil Urman.

Tee time for The Auxiliary

As always, members of The Auxiliary turned out in force to lend their support to the JGH Golf Classic. Helping to make the day a success were volunteer coordinators Bonnie Rothstein (left) and Ellen Amdursky.

Among The Auxiliary team members at the JGH Golf Classic were (from left, seated) Charlotte Mann, Phyllis Karper, Nancy Rubin and Linny Blauer, and (from left, standing) Phyllis Abosh, Lee White, Marilyn Aisen and Sandra Gutherz.

HELP! WHAT TO DO WITH MY US DOLLARS?

With the U.S. Dollar dropping significantly versus the Canadian Dollar in recent years, most Canadians converted funds thinking they were making a great financial decision only to see the greenback continue to drop.

With the U.S. Dollar now sitting at par, many regret the impulsive move. But what's done is done, and with the current volatility of the currency markets, it is very difficult to predict the value of the U.S. Dollar in the foreseeable future.

1) STAYING **100% LIQUID**

With U.S. Treasury Bills paying close to 0% and banks not paying interest... you are stuck...but there may be hope if you are dealing with a brokerage firm. In the last years, Dundee, Royal Bank and Manulife have created high interest savings accounts, eligible for deposit insurance from the Canada Deposit Insurance Corporation up to $100,000, and on which interest is compounded daily. The average rate is about 0.50 percent...better than nothing.

2) GOING WITH A LITTLE BIT LONGER MATURITY WITH **CORPORATE BONDS**

A good alternative to cash can be corporate bonds. They can provide stable cash flow and decent returns. For example, we recently purchased a 5-year Morgan Stanley bond will pay close to 5 percent yield to maturity.* Of course you have to consider the additional risk.

A good option is to look for Canadian companies that issue bonds in U.S. Dollars. For example Fairfax Financial, Bombardier and Quebecor all have bonds issued in U.S. Dollars...the problem is getting access to them!

In most Canadian full service brokerage or discount firms, the U.S. bond inventories are very low. Most firms don't carry bonds and go through a U.S. firm to get some offerings.

To help you with the search, try to look for a firm that has a U.S. Bond Desk.

For example, for us at Richardson GMP, the recent purchase of Miller Tabak Robert's fixed income operations (renamed GMP Securities LLC) has changed the landscape for U.S. fixed income. It opens a whole new world of ideas and research, something that cannot be duplicated in Canada.

3) U.S. DOLLAR PREFERRED SHARES **ISSUED BY CANADIAN COMPANIES... REALLY?**

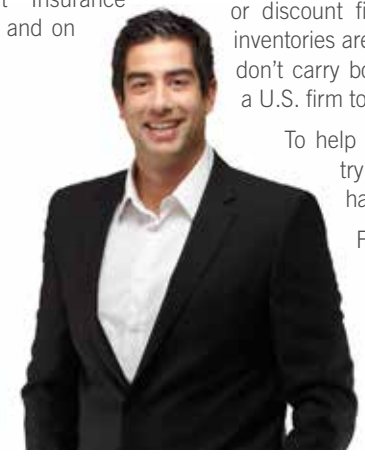
Indeed they do exist! Very rare, only a few trade on the exchange. This can be tricky as most U.S. preferred shares are perpetual (no maturity date) and this means that if rates go up, most likely the price of the share will go down offsetting the higher interest.

Another benefit of owning a preferred share for Canadians is the dividend tax credit. Even if you are receiving US funds, the income is still eligible under the dividend tax credit plan. This makes preferred shares even more attractive.

Enbridge most recently issued a U.S. reset preferred share at a rate of 4 percent for the first 5 years. The reset rate will be equal to 5-Year United States Government Bond Yield ("USGG5YR") plus 3.15% renewable for 5 years.*

To help you make sense of it all, I invite you to subscribe to our free bi-weekly newsletter and visit our website: **www.thermgroup.ca**.

** Rates posted were available at time of transaction and may have changed.*



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Directeurs, Gestion de patrimoine

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Jewish General Hospital Foundation
REPORT

Excellence through partnerships

Achieving and sustaining the level of excellence for which the JGH is known is a very costly endeavour. Recurring budget cuts, rapidly evolving medical technology, increasing patient volumes and the growing demand for enhanced services stemming from the rising prevalence of chronic and age-related diseases make it virtually impossible for the JGH—or any hospital, for that matter—to accomplish this on its own.

While the government, with limited resources, funds the hospital's operating budget, the major challenges facing our healthcare system require a dynamic partnership among the hospital, its dedicated staff, The Auxiliary, Hope & Cope, the government and our donors and supporters. It is this collaboration that empowers the JGH to remain at the forefront of scientific discovery, innovation and clinical excellence.

Many recent advances demonstrate that the strength and strategic engagement of our community of donors can lead to powerful partnerships and achieve great results in access and quality of care, not only for JGH patients, but for the healthcare system as a whole.

In the area of cancer, for example, an initiative from the Larry and Cookie Rossy Family Foundation has enabled the establishment of the Rossy Cancer Network—a landmark collaboration among the McGill University Health Centre (MUHC), the JGH, St. Mary's Hospital and McGill University, which aims to improve clinical outcomes and offer cancer patients a more integrated and increasingly higher standard of care across the network. This innovative, 10-year project provides donors with the exceptional opportunity to double their donation and its impact, as each dollar contributed to help lead and shape the future of cancer care and research in Montreal and Canada will be matched by the Rossy Foundation, up to a maximum of $800,000 per year per participating institution. Likewise, the Enbridge Ride to Conquer Cancer, which was held recently for the fifth time, brings together thousands of people who raise millions of dollars each year to support cancer research, prevention and treatment in the Segal Cancer Centre at the JGH, the University of Quebec Hospital Centre, the Trois-Rivières Regional Hospital Centre, the Gatineau Health and Social Services Centre and Princess Margaret Hospital in Toronto.

The commitment and support of our donors has also empowered the JGH to become a magnet hospital, attracting the best and brightest clinicians and researchers from around the world, such as Dr. Jean-François Boileau (surgical oncologist) and Dr. Nathalie Johnson (clinical scientist specializing in lymphoma). It also enabled us to acquire, in partnership with the government, the latest medical imaging technology such as a PET/CT scanner, and to be the first radiation oncology site in Quebec to have a state-of-the-art Truebeam linear accelerator. This has made our hospital the choice destination for the best in medical treatment and care right here in Montreal.

The vital contribution of our community of donors to the development of productive partnerships that will bring major improvements to the entire Quebec healthcare system is nowhere more evident than in Pavilion K, the new critical-care wing currently under construction. The strength of our community of donors is what allowed us to establish a truly unique and innovative collaborative effort and funding solution with the government to make Pavilion K a reality, so that Quebecers can benefit from enhanced access to state-of-the-art emergency and critical services. While the government has provided funding to build Pavilion K, the Foundation, through its community partners, has agreed to provide the $26 million needed for Pavilion K's indoor parking lot and to cover any cost overruns that may occur in constructing the entire facility. Furthermore, we have committed to raise in excess of $50 million as part of our current Capital Campaign to equip the new surgical suites and intensive care units, furnish private rooms with sophisticated beds, and meet many other needs that are not funded by the government.

Community support plays a crucial role in empowering the JGH to go beyond standard care and to deliver excellence. Partnerships like these remain the key to our success in achieving our common goal of better health and better health care for the people of Montreal and Quebec, now and in the future. We hope you will join us along the way for this exciting journey, and take a great deal of pride in what we accomplish together.

— Myer Bick
President and CEO

Giving back to the community

National Bank—the leading bank in Quebec and the sixth-largest in Canada—has been a partner of the JGH Foundation since 1988, contributing to the health and well-being of the entire community through its longstanding support of the Jewish General Hospital and its mission of providing continued excellence in patient care, research and teaching.

"At National Bank, the client is at the very heart of all of our activities," says Karen Leggett, Executive Vice-President – Marketing. "For us, being close to our clients also means being actively involved in the community and contributing to its development and well-being. Every year, we join forces with hundreds of organizations to help the communities we serve find solutions to the challenges they face, through a well-defined donation and sponsorship program, successful fundraising efforts, and teams of current and retired employee volunteers who are determined to make a difference."

This year, within the framework of the You Have the Power to Heal campaign, National Bank further demonstrated and enhanced its unwavering commitment to creating the greatest possible value for the communities where it is present across Quebec and beyond, by making a generous and insightful donation of $2 million toward establishing a Molecular Pathology Centre (MPC) at the JGH.

The MPC will propel the JGH to the forefront of a new era of personalized medicine, which allows treatment to be targeted to a specific individual. "The MPC is eagerly awaited by the entire JGH community," says Myer Bick, President and CEO of the JGH Foundation. "When it opens in fall 2013, it will be the first facility of its kind in Quebec dedicated to next-generation diagnosis and individualized therapies for cancer and, in the near future, neurological and cardiovascular diseases." "It will position Quebec among a small group of international leaders in personalized medicine," adds Dr. Alan Spatz, Director of the JGH Department of Pathology. "Even more importantly, it will enable Montrealers and Quebecers to reap the benefits of this new, cutting-edge form of medicine. These major advantages include the ability to identify individuals at increased risk of suffering from certain cancers before they appear, to evaluate and predict the response to therapy, and to select and develop targeted treatments that are more effective and less likely to produce adverse reactions in a given patient. The future holds great promise and we will make a huge difference for our patients and their loved ones, thanks to the support of deeply committed partners such as National Bank."

"The Molecular Pathology Centre stands out through its focus on innovation and excellence, values which reflect National Bank's own culture," says Mrs. Leggett. "Considering the prevalence of cancer and cardiovascular diseases, we are proud to participate in the development of a centre which will save and extend thousands of lives by matching therapy to each patient, and increasing knowledge about these diseases through innovative research." "The MPC will become an invaluable resource for the whole community," concurs Mr. Bick. "The entire JGH family is grateful for this life-affirming gift and we are looking forward to pursuing our fruitful partnership with National Bank for the benefit of all the communities we serve."

Volunteer spotlight

After a long and rewarding, 37-year career with the Royal Bank of Canada, **Eric Patterson** took early retirement in 1996. Seeking a means of serving society, he began volunteering at the JGH on February 28, 1997, and since March 1998, he has worked exclusively in the Department of Orthopedics. Eric's duties include welcoming/receiving and registering patients who arrive for scheduled appointments, and regulating/monitoring the flow of patients to the appropriate examination rooms. He also performs a wide range of general duties, including completing errands for staff members when the need arises. "I thoroughly enjoy the team spirit of the department and the interaction with staff members, all of whom are kind and courteous," says Eric. "It is truly rewarding for me to be part of a team that is devoted to providing patients with the best and most compassionate care possible."

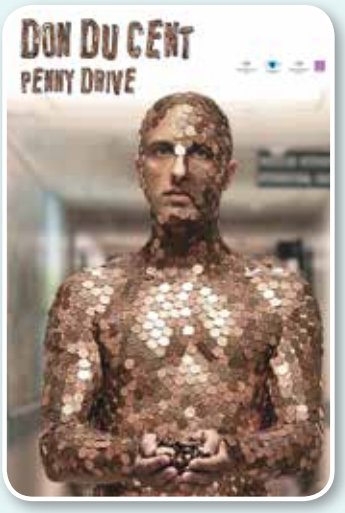
Since he began volunteering at the JGH, Eric has accumulated an incredible 8,344 hours of volunteer service and submitted 14 Foundation Grant Applications to the RBC Employee Volunteer Grants Program, totalling $7,000 for the benefit of the hospital. Under this program, any current or retired employee who donates 40 hours per year of volunteer service to a charitable organization generates a $500 donation by the RBC to that organization. "The RBC truly fosters a culture of giving among its employees," Eric proudly states. "Since its establishment in 1999, over 24,000 grants totalling in excess of $12 million have been disbursed by the RBC through the program."

Throughout his 15 years of volunteering at the JGH, Eric has also made personal donations to the Hospital and the Department of Orthopedics in particular, and has been a longstanding Gold member of the JGH Foundation's Governors' Circle. He also lends his support to institutions such as St. Mary's Hospital, the Montreal Children's Hospital and the Montreal Museum of Fine Arts.

The JGH family conveys its deepest appreciation to Eric for his enduring commitment and dedication, as well as to the Royal Bank of Canada for its generous and continuing financial support through its Volunteer Grant Program. Thank you for making a substantive difference in the hospital and for our patients.

Become a valued member of our team! To learn more about opportunities in volunteering at the JGH Foundation and how you can help contribute to the health and well-being of your community, please contact Siobhan O'Brien at 514-340-8222, extension 3069, or siobhanobrien@jgh.mcgill.ca.

Make Your Pennies Count campaign reaches $16,000 mark



On December 13, 2012, the JGH Foundation, the JGH Auxiliary, Hope & Cope and Carrément rose (an original initiative involving over 450 Grade 9 students from College Regina Assumpta) launched the Make Your Pennies Count campaign to raise essential funds for the Hope & Cope Compassionate Fund. This unique program helps cancer patients and their families who are experiencing financial difficulties and do not have access to other family or community support. The Fund responds to urgent requests from patients who are coping not only with the physical and emotional side-effects of cancer, but the financial devastation that can occur when a patient can no longer work due to illness. It is entirely supported through the generosity of private donors.

We are pleased to announce that as of the end of July, over $16,000 had been raised through collection boxes at the JGH, the JGH Hope & Cope Wellness Centre / Lou's House, College Regina Assumpta and Selwyn House School, online donations and contributions to the Penny Kolb Celebration Fund for the Penny Drive (established on February 3, 2013, to mark Mrs. Kolb's birthday), and the Vivianne and Brahms E. Silver 50th Anniversary Celebration for the Hope & Cope Compassionate Fund (established on June 9, 2013 to mark the 50th wedding anniversary of the Silvers). Thanks to the generosity of Sybil Fleming, who covered all of the costs associated with the campaign, every single penny collected goes toward supporting the Hope & Cope Compassionate Fund.

Charles Dayan brought in two buckets full of penny rolls.

Hope & Cope and the families who bene-fited from compassionate help at a critical juncture in their lives, thanks to the Make Your Pennies Count campaign, are grateful to each and every person who has contributed to this important endeavour. "Unfortunately, for every cancer patient and his/her family that we manage to help, there are still twice as many people whose requests we have to turn down due to a lack of funding," says Hope & Cope Executive Director Suzanne O'Brien. "For these patients and their families, every penny counts. That's what makes this campaign so vital."

You can drop your pennies into specially identified collection boxes near the main entrances of the Jewish General Hospital, or at the JGH Hope & Cope Wellness Centre / Lou's House. You can also donate online at jghpennydrive.org or jghfoundation.org, or at 514-340-8251. If you would like to organize a penny collection at your workplace, school or among friends, please contact Larry Sidel at 514-340-8222, extension 1922. Together, we can make every penny count!

Jewish General Hospital Foundation
Governors' Circle

Upcoming events for members

How to Win the War Against Cancer

By **Nathalie A. Johnson**, MD, PHD, FRCPC, Physician in the JGH Division of Hematology and researcher at the Segal Cancer Centre of the Lady Davis Institute at the JGH

Monday, September 30, 2013
7:30 to 8:30 p.m.
Block Amphitheatre, B-106,
Jewish General Hospital
Refreshments at 8:30 p.m.

Lots About Clots: Focus on Air Travelers

By **Susan R. Kahn**, MD, FRCPC, MSc (Epid), Director of the JGH Thrombosis Program and Associate Director for Clinical Research, Lady Davis Institute at the JGH

Wednesday, October 9, 2013
7:30 to 8:30 p.m.
Block Amphitheatre, B-106,
Jewish General Hospital
Refreshments at 8:30 p.m.

Both lectures will be in English, with a question period in French and English. ***Open to all members of the JGH Foundation Governors' Circle.***

Space is limited: first come, first served. ***Please RSVP without delay to Tiffany England at 514-340-8222, extension 5467, or tengland@jgh.mcgill.ca.***

Become a member!

Members of the JGH Foundation Governors' Circle provide exemplary support and play an important role in advancing clinical research and/or patient care at the JGH, with the promise that these endeavours hold for all patients and their loved ones. **You, too, can make a difference by joining us today!** For more information about membership or upcoming events involving the Governors' Circle, please contact Larry Sidel at 514-340-8222, ext. 1922, or lsidel@jgh.mcgill.ca.

IN THE NEWS...

21st Annual JGH Silver Star Mercedes-Benz Golf Classic tees up $1.3 million

(left to right): Anthony Broccolini, John Broccolini, Paul Broccolini, Joseph Broccolini with event Co-Chairs Ted Matthews, Hillel Greenbaum and Alan Desnoyers.

The Jewish General Hospital Foundation held its 21st Annual JGH Silver Star Mercedes-Benz Golf Classic in honour of the Broccolini family on June 3 at the Hillsdale Golf and Country Club.

Co-Chaired by **Alan Desnoyers**, **Hillel Greenbaum** and **Ted Matthews**, the event attracted more than 520 of Montreal's foremost business and community leaders from all backgrounds and age groups for a luxurious day on the golf course. Included in this group were over 100 young adults and professionals under the leadership of Aaron Litvack, David Marsh, Peter Rosenthal and George Spiliadis, who once again participated in the Next Generation CIBC Golf Classic morning tournament.

The evening's festivities included a special video tribute produced by Christina Broccolini, actress and daughter of Broccolini Construction President John Broccolini, followed by an inspirational speech by Managing Director Anthony Broccolini. Participants then enjoyed a cocktail dinner featuring delicious food by Hillsdale, Mikado Saint-Denis, Wolfe Montcalm and Rib'n Reef, with live entertainment by The Fundamentals. Rounding out the evening was a raffle during which a lucky winner snatched the ultimate prize: a Barbados getaway for two, including air travel and a ten-night stay at two luxury resorts, Crane Residential Resort and Fairmont Royal Pavilion, courtesy of Anita and James Altman.

The marquee event raised $1.3 million, thanks to the extraordinary commitment and hard work of the organizing committee and the many people and institutions who demonstrated their respect and admiration for the Broccolinis (owners of Broccolini Construction, one of Montreal's most renowned and successful general contractors) through their participation and support. "The entire JGH family is deeply honoured and proud to be associated with all three generations of this family, who have contributed so much to the Montreal community," said JGH Foundation President Myer Bick. "Our city in general and the JGH in particular are truly blessed that Montreal is their home and their passion." Since its inception, the Golf Classic has raised over $16.3 million to improve the medical care, life expectancy and quality of life of the people of Montreal, Quebec and beyond.

Proceeds from this year's edition will support the JGH Centre of Excellence in Thrombosis and Anticoagulation Care (CETAC), a novel and groundbreaking facility that was recently created in partnership with Sanofi Canada, which is contributing $1 million over three years to this initiative. The CETAC's mandate is to provide leadership and expertise to other institutions and agencies in Quebec to support local initiatives in the prevention and treatment of thrombosis (blood clots), development of practice guidelines, technology assessment activities and support for thrombosis-related clinical decision making. This will improve patient outcomes, increase efficacy at all levels of the healthcare system, and translate into better long-term health for many individuals as well as less financial pressure on the already overburdened public healthcare system. It will also contribute to bringing more awareness to this preventable condition and increase its visibility as an important public health issue throughout Quebec. Funds raised by the Golf Classic will contribute to accelerating the development of the CETAC and its vital contribution toward lessening thrombosis-related mortality, morbidity and the socio-economic burden throughout the Quebec healthcare system.

We thank the many individuals, companies and groups who participated and gave their time, energy and financial support to this worthwhile and highly rewarding cause. A very special thank you goes to the following: The dedicated Co-Chairs, Next Generation Co-chairs and members of the Golf Classic organizing committee; longstanding event host Sam Eltes of Silver Star Mercedes-Benz, our many generous sponsors; our dynamic and ever-helpful partners at the JGH Auxiliary; and the staff of Hillsdale Golf and Country Club for their close collaboration. Special thanks also go to the Foundation staff, particularly Annette Goldman, Mary Etzitian and Carolyne Baker, who spared no effort in helping to deliver one of the most successful golf tournaments in North America.

We acknowledge with gratitude all of the sponsors for their support, with a special thank you to the following major sponsors:

Silver Star Mercedes-Benz
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La Cie Électrique Britton Ltée.
La Fondation Mirella and Lino Saputo
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PearTree Financial Services
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Borden Ladner Gervais
Vivian and Howard Stotland

16th Annual JGH CIBC Tennis Tournament and Party surpasses expectations

(left to right): George Itzkovitz, Sara Miller, Tali Chemtob, Wendy Wechsler, Demo Trifonopoulos and Gary Wechsler.

The 16th Annual JGH CIBC Tennis Tournament and Party surpassed expectations, attracting over 600 influential entrepreneurs and professionals from diverse backgrounds and age groups and raising a record-breaking $580,000.

One of the longest-running Foundation events, the Tennis Classic has raised more than $3 million since its inception in 1998.

This year, the Organizing Committee, under the dynamic and inspired leadership of Co-Chairs **George Itzkovitz**, **Demo Trifonopoulos**, and **Wendy and Gary Wechsler**, managed to thoroughly re-energize the event by raising their sights to more ambitious goals and by making a few changes. Chief among these was the decision to hold the event over two separate days and to make the dinner gala more up-scale and spectacular. The tennis tournament was held on Thursday, May 23, at Club Sportif Côte de Liesse. It featured a full day of tennis/squash, breakfast, lunch, massages, spa treatments, clinics and more. The dinner gala on Saturday, May 25, in a heated tent in front of Luxe Rentals on Decarie Blvd., had a colourful and exciting Marrakech Fever theme. The evening's entertainment included belly dancers and women dancing with live snakes wrapped around them, plenty of food and cocktails, a silent auction, and dancing until the wee hours of the night with live music by the band 1945.

Proceeds from the event will support the establishment of a Vascular Health Program at the JGH, a patient-centred initiative built on interdisciplinary collaboration and clinical excellence. The Program aims to provide better integration and quality of care and improve the outcomes and experiences of patients once they are discharged from the hospital after a vascular event or intervention. Vascular disease is the root cause of many serious medical complications that combine to form the leading cause of death in Canada. It contributes to heart attacks, strokes, kidney failure, poor circulation to the limbs, cognitive decline and dementia. The Vascular Health Program will contribute markedly to eliminating or reducing these complications by focusing on patients who have vascular diseases and are discharged from the hospital. The Program will also provide an integrated platform enabling the JGH to be at the cutting-edge of research and treatment in vascular disease.

We thank the many individuals, companies and groups whose generosity and commitment have contributed to making this year's Tennis Classic the most successful ever: the dedicated members of our organizing committee, JGH Foundation staff and Event Coordinator Sara Miller, Administrative Assistant Rana Saheb and Director of Events Tali Chemtob; and our many sponsors, supporters and guests. Special thanks go to our Co-Chairs for the vision, inspiration and determination that propelled the event to new heights.

We acknowledge with gratitude all of the sponsors for their support, with a special thank you to the following major sponsors:

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CIBC

Major Sponsors
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Wendy & Gary Wechsler and Family

Tent
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McCarthy Tétrault LLP
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Tidan Inc.

JGH Stories

"We in Canada are blessed to have a free medical system that prioritized saving my life. Elsewhere, the costs would have affected the speed, the type of treatment and of who the doctors would have been."

– Larry Berlin

To read Larry Berlin's full story and for more stories from JGH patients, donors and staff, or to share your own story, please visit the JGH Stories online microsite at **http://stories.jghfoundation.org**.

Events

Community action

Throughout the year, the JGH Foundation hosts or benefits from a wide variety of events that call upon all of us to support initiatives that empower the Jewish General Hospital. This enables the JGH to save lives, improve patients' quality of life and provide the most vulnerable members of society with the care they need.

Past events

21st Annual Silver Star Mercedes-Benz JGH Golf Classic, in honour of the Broccolini Family
June 3 – Hillsdale Golf & Country Club
Co-Chairs: Alan Desnoyers, Hillel Greenbaum and Ted Matthews, FCPA, FCA
Raised over $1.3 million for the JGH Centre of Excellence in Thrombosis and Anticoagulation Care, with an additional $1 million matching gift from Sanofi Canada

Soirée Carrément rose : « Dangereusement rose »
June 3 – Gallerie MX
Organized by Natalie Claude, Christine Barnes and students from Collège Regina Assumpta
Raised over $10,000 for the Carrément rose Fund for the Breast Cancer Centre
Please visit http://carrementrose.tumblr.com/ for more information

19th Annual McGill Head and Neck Cancer Fundraiser
June 11 – Arsenal de Montréal
Co-Chairs: Dr. Saul Frenkiel and Dr. Richard Payne
Raised over $700,000 for the Thyroid Cancer Research and Educational Fund

Dream Evening with Jennifer Holliday
June 11
Hosted by Vivian Stotland and Linda Smith
Raised $25,000 for REOP, Hope & Cope's Cancer Exercise Program

2nd Annual Antony Proteau Ball Hockey Tournament
June 14-15 – Bill Durnan Arena
Benefiting Hope & Cope's Young Adult Programming
Amount raised unavailable at press time
Special thanks to Keif Orsini, Tim Schiavi, Richard Ribaya, James Lavinskas, Matthew Chausse and Daniel Laplante
For more information: ap12fund.com

11th Annual Cecil's Ride
June 29 – Stowe, Vermont
Organized by the April family
Raised over $52,000 for the Colorectal Cancer Molecular Diagnostic Program

5th Enbridge Ride to Conquer Cancer
July 6-7
Honourary Co-Chairs: Serge Godin and Marc Parent
Co-Chairs: Dr. Sheldon Elman and André Roy
Raised $6.3 million for cancer research, treatment and care at the Segal Cancer Centre at the JGH and at our partner hospitals throughout the province
Special thanks to our National Title Sponsor, Enbridge
For more information: conquercancer.ca, 1-866-996-8356

Golf Tournament in memory of Benoît St-Pierre
August 5 – Golf St-Raphael
Benefiting the Benoît Saint-Pierre Fund for Palliative Care and Hope & Cope
Amount raised unavailable at press time

12th Annual HSBC Charity Golf Tournament
Chair: Bill Aubé
August 12 – Le Mirage Golf Club
Benefiting the Adult and Young Adolescent Oncology Program
Amount raised unavailable at press time

Soirée Fantastique: Celebrating our Heroes
August 20 – Congregation Shaar Hashomayim
Benefiting Hope & Cope's various programs for cancer survivors and their families at the hospital and at the JGH Hope & Cope Wellness Centre / Lou's House
Amount raised unavailable at press time
Special thanks to Michael Flinker, Joan Ungar, Sylvia Vogel, Lillian Vineberg and Heleena Wiltzer
For more information: hopeandcope.ca

9th Annual Pharmaprix Weekend to End Women's Cancers
August 24-25
Co-Chairs: Nicolas Caprio and Éric Bédard
Benefiting breast and gynecologic cancer research and care at the Segal Cancer Centre at the JGH
Amount raised unavailable at press time
Special thanks to our National Title Sponsor, Pharmaprix
For more information: endcancer.ca, 514-393-WALK (9255)

9th Annual Lila Sigal Hockey Marathon
September 7 – Samuel Moscovitch Arena
Co-Chairs: Farrel Miller and David Sigal
Benefiting the JGH Cancer Nutrition and Rehabilitation Program
Amount raised unavailable at press time
For more information: jgh.ca/en/cancernutrition-rehabilitationprogram or marathonhockey.com

Dorval, Sources, St. Henri Auto Parts Walk-a-thon
September 9 – St. Maxime Park (Chomedey, Laval)
Benefiting REOP, Hope & Cope's Cancer Exercise Program
Amount raised unavailable at press time
Special thanks to organizers Alex Trichas and the Dimopolous Family – Chris, Nick, André and Dimitri

It is immensely gratifying to know that together we can accomplish great things to help people throughout Montreal and Quebec for many years to come. To support any of the events and/or initiatives described in these pages, please contact the JGH Foundation at 514-340-8251. Donations can also be made at jghfoundation.org. If you are interested in organizing a fundraising event, please contact Mary Etzitian, Coordinator Third Party Events, at 514-340-8222, ext. 3986.

Thank you for making a difference!

Jewish General Hospital Foundation
3755 Côte Ste-Catherine Road, A-107, Montreal (Quebec) H3T 1E2
Tel.: 514-340-8251 · Fax: 514-340-8220 · info@jghfoundation.org

Upcoming events

SEPTEMBER 19

***The Big O* presented by Gloria's Girls Next Generation**
Entourage Club
Co-Chairs: Hillary Freedman and Laura-Pearl Spivack
Benefiting the Gloria Shapiro Endowment Fund for Ovarian Cancer Research
Contact: Mary Etzitian, 514-340-8222, ext. 3986

4th Annual Fall Fling
Chez Rosalie Restaurant
Organized by the Young Philanthropists of the JGH Foundation
Benefiting the acquisition of endoscopic equipment for the Division of Radio-Oncology
Contact: Philippe Gonyea, 514-340-8222, ext. 2027

SEPTEMBER 21

4th annual Christine Kelly Memorial Fund for Translational Research Golf Tournament
Hemingford Golf Club
Organized by Jeff and Jenna Saray and friends & family
Benefiting the McGill Centre for Translational Research, located in the Segal Cancer Center and aligned with the Lady Davis Institute at the JGH
Contact: Mary Etzitian, 514-340-8222, ext. 3986
For more information: jgh.ca/en/translationalresearch

SEPTEMBER 29

Ain't Misbehavin'
Segal Centre for Performing Arts
Benefiting the Hemovascular Research Axis, particularly the research of Dr. Nathalie Johnson, at the Lady Davis Institute at the JGH
Special thanks to Allan Sandler and Copa de Oro Productions
Contact: Stephanie Roza, 514-340-8222, ext. 2587

OCTOBER 6

Gloria's Girls presents the 2nd "A Night at the Theatre", featuring The St. Leonard Chronicles
Centaur Theatre
Co-Chairs: Maxine Shapiro Rosenblatt and Susan Bercovitch
Benefiting the Gloria Shapiro Endowment Fund for Ovarian Cancer Research
Contact: Mary Etzitian, 514-340-8222, ext. 3986

NOVEMBER 1

Le festin de Babette, gastronomic evening
Entrepôt Dominion
Co-Chairs: Pierre Brosseau and Normand Beauchamp
Benefiting the Aging Research Axis, especially research on Alzheimer's disease, at the Lady Davis Institute at the JGH
Contact: Philippe Gonyea, 514-340-8222, ext. 2027

NOVEMBER 19

JGH Gala 2013, honouring Michèle Dionne and The Honourable Jean Charest
Arsenal de Montréal
Co-Chairs: Tony Loffreda, Sonny Gordon and Joan Prévost
Benefiting medical research at the Lady Davis Institute at the JGH
Contact: Annette Goldman, 514-340-8222, ext. 4602

Hot sounds, cool event

As hospital staff, patients and visitors basked in the warm June weather, the 14th annual JGH Jazz festival immersed them in a world of music that entertained and healed. The two-week event, daily at lunch-hour in the Côte-des-Neiges picnic area, was organized by JGH Music Therapist Bryan Highbloom (on saxophone at upper left), who occasionally joined the performers to add his own distinctive touch to the festival.

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please contact Amanda Starnino
at 514-340-8222, extension 8424
or astarnino@jgh.mcgill.ca

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The Jewish General Hospital is just bursting with exciting, new developments in ground-breaking treatment, compassionate care and visionary research. That's why **jgh.ca/jghnews** is where you'll find a digital version of *JGH News*, as well as these extra stories about the people and services at the JGH:

- Doctors from the JGH Department of Family Medicine are providing additional care to patients—especially the elderly—before and after they undergo orthopedic surgery. As a result, the mortality rate has been cut by 30 per cent and the number of transfers to Intensive Care has been slashed by 50 per cent.
- Voices of Hope, a high-spirited choir of cancer survivors that's supported by Hope & Cope, is about to mark its fifth anniversary with a concert celebrating the tenacity of its life-affirming participants.
- Can the simple act of walking really benefit your health? How safe is your privacy when you search online for information related to your health? Get the answers from JGH experts.

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Chris Donato Investment Advisor

514 842 7615 | noonoo.pinsler.donato@td.com
NoonooPinslerDonato.com

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